

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000001855

**Entity Name:** CHARLOTTE HIGH SCHOOL PROJECT GRADUATION, INC.

**Current Principal Place of Business:**

1107 WEST MARION AVENUE  
SUITE 115  
PUNTA GORDA, FL 33950-5372

**Current Mailing Address:**

P.O. BOX 494917  
PORT CHARLOTTE, FL 33949-9979 US

**FEI Number:** 22-3942669

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JOHNSON, LEONARD  
1536 RIO DE JANEIRO AVENUE  
#404  
PUNTA GORDA, FL 33983 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** LEONARD M JOHNSON

03/24/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT

Name LAMBERT, DENNIS

Address 30444 TURTLE DOVE LANE

City-State-Zip: PUNTA GORDA FL 33982

Title DIRECTOR, TREASURER

Name JOHNSON, DOROTHY

Address 25933 AYSAN DRIVE

City-State-Zip: PUNTA FORDA FL 33983

Title DIRECTOR, VP

Name CHALONE, TASHA

Address 23389 MCCANDLESS AVENUE

City-State-Zip: PORT CHARLOTTE FL 33980

Title DIRECTOR

Name LORAH, GEOFF

Address 3865 BORDEAUX DRIVE

City-State-Zip: PUNTA GORDA FL 33950

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DOROTHY JOHNSON

TREASURER

03/24/2023

Electronic Signature of Signing Officer/Director Detail

Date