#### 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001855

Entity Name: CHARLOTTE HIGH SCHOOL PROJECT GRADUATION, INC.

FILED
Mar 18, 2021
Secretary of State
7209827996CC

# **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 126 E. OLYMPIA AVENUE SUITE #300 PUNTA GORDA FL 33950 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 03/18/2021

Electronic Signature of Registered Agent Date

#### Officer/Director Detail:

Title DIRECTOR, PRESIDENT Title DIRECTOR, SECRETARY LAMBERT, DENNIS PETRO, CAMERON Name Name 30444 TURTLE DOVE LANE 2407 QUIRT LANE Address Address City-State-Zip: City-State-Zip: PUNTA GORDA FL 33983 PUNTA GORDA FL 33982

5.1, 5.1.1. 25.1.5. 1 2 5.5.5. 2 5.1.1. 2 5.1.1. 2 5.1.1. 2 5.1.1. 2 5.1.1. 2 5.1.1. 2 5.1.1. 2 5.1.1. 2 5.1.1

Title DIRECTOR, TREASURER Title DIRECTOR, VP
Name JOHNSON, DOROTHY Name CHALONE, TASHA

Address 25933 AYSEN DRIVE Address 23389 MCCANDLESS AVENUE City-State-Zip: PUNTA FORDA FL 33983 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.

**TRES** 

Electronic Signature of Signing Officer/Director Detail