

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000002606

**Entity Name:** FLORIDA CHARTER SCHOOL ALLIANCE, INC.

**FILED**  
**Apr 14, 2016**  
**Secretary of State**  
**CC8206734578**

**Current Principal Place of Business:**

4500 PGA BOULEVARD  
SUITE 302  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

4500 PGA BOULEVARD  
SUITE 302  
PALM BEACH GARDENS, FL 33418 US

**FEI Number:** 27-2769707

**Certificate of Status Desired:** No

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

BOWER, TANYA LESQ  
TRIPP SCOTT, P.A.  
110 SE 6TH STREET 15TH FLOOR  
FORT LAUDERDALE, FL 33301 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name STEIN, JUDITH S  
Address 4500 PGA BOULEVARD  
SUITE 302  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D, C  
Name HORNE, JAMES W  
Address 4500 PGA BOULEVARD  
SUITE 302  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D  
Name HOLLANDER, LAUREN  
Address 4500 PGA BOULEVARD  
SUITE 302  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D  
Name FANJUL, EMILIA  
Address 4500 PGA BOULEVARD  
SUITE 302  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D  
Name KIRTLEY, JOHN  
Address 4500 PGA BOULEVARD  
SUITE 302  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D.  
Name LEVESQUE, PATRICIA  
Address 4500 PGA BOULEVARD  
SUITE 302  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D  
Name HAGE, JONATHAN  
Address 4500 PGA BOULEVARD  
SUITE 302  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title D  
Name ZULUETA, IGNACIO  
Address 4500 PGA BOULEVARD  
SUITE 302  
City-State-Zip: PALM BEACH GARDENS FL 33418

*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:** JAMES HORNE

**DIRECTOR, BOARD  
CHAIR**

**04/14/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date