## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000011846

Entity Name: NEW ALTERNATIVE EDUCATION HIGH SCHOOL OF LEON

COUNTY, INC.

## **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: 45-4322856 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GROSS-ARNOLD, MELISSA 6279 DUPONT STATION CIRCCLE JACKSONVILLE, FL 32217 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: MELISSA GROSS-ARNOLD 04/17/2015

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR, VICE CHAIR Title D

RUSSELL, JENNIFER BRACY, STEVE Name Name

442 SAVOIE DRIVE Address Address 5101 CENTRAL GARDENS WAY

202 City-State-Zip: PALM BEACH GARDENS FL 33410

City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR

DIRECTOR, CHAIRMAN Title HYNES, BARBARA A Name Name KNIEPMANN, KEN J 1248 WHITE STAR LANE Address Address 3512 CHIFDEN DRIVE

City-State-Zip: TALLAHASSEE FL 32312 TALLAHASSEE FL 32309 City-State-Zip:

Title DST

City-State-Zip:

Name ANGELOS, JOANNA Address 2079 OX BOTTOM ROAD TALLAHASSEE FL 32312

above, or on an attachment with all other like empowered.

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

SIGNATURE: JENNIFER RUSSELL

DIRECTOR

04/17/2015

**FILED** Apr 17, 2015

**Secretary of State** 

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