

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000011846

**Entity Name:** NEW ALTERNATIVE EDUCATION HIGH SCHOOL OF LEON COUNTY, INC.

**FILED**  
**Feb 03, 2020**  
**Secretary of State**  
**5985510444CC**

**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:**

BARNETT, CHARLES DAWSON  
224 DATURA STREET  
SUITE 1113  
WEST PALM BEACH, FL 33401 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:** CHARLES DAWSON BARNETT

02/03/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name RUSSELL, JENNIFER  
Address 442 SAVOIE DRIVE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DC  
Name BRACY, STEVE  
Address 5101 CENTER GARDENS WAY  
#202  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name HOLLANDER, LAUREN  
Address 4500 PGA BLVD  
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:** LAUREN HOLLANDER

**DIRECTOR**

02/03/2020

Electronic Signature of Signing Officer/Director Detail

Date