

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000007428

**Entity Name:** THE JAMES MADISON PREPARATORY HIGH SCHOOL, INC.

**FILED**  
**Mar 07, 2022**  
**Secretary of State**  
**1287853150CC**

**Current Principal Place of Business:**

176 NW CRANE AVE  
MADISON, FL 32340

**Current Mailing Address:**

176 NW CRANE AVE  
MADISON, FL 32340 US

**FEI Number: 46-1553270**

**Certificate of Status Desired: No**

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

AKERMAN, JOSEPH M  
176 NW CRANE AVE  
MADISON, FL 32340 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: JOSEPH M AKERMAN**

**03/07/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name DAVIS, JAMES B IV  
Address 378 E BASE ST SUITE 219  
City-State-Zip: MADISON FL 32340

Title TREASURER  
Name JOHNSON, KAREN ANNETTE  
Address PO BOX 157  
City-State-Zip: MADISON FL 32341

Title PRESIDENT  
Name HARDEE, CARY A  
Address PO BOX 450  
City-State-Zip: MADISON FL 32341

Title VP  
Name DURST, JAMES  
Address 6754 NE DUSTY MILLER AVE  
City-State-Zip: PINETTA FL 32350

Title SECRETARY  
Name TOWNSEND, JULIE  
Address 4961 NW CR 253  
City-State-Zip: GREENVILLE FL 32331

Title DIRECTOR  
Name MATTAIR, MARVIN  
Address PO BOX 98  
City-State-Zip: MADISON FL 32341

Title DIRECTOR  
Name PLATT, TRACEY  
Address 11061 WEST US 90  
City-State-Zip: GREENVILLE FL 32331

*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: CARY A HARDEE**

**PRINCIPAL**

**03/07/2022**

Electronic Signature of Signing Officer/Director Detail

Date