

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000005166

**FILED**  
**Mar 02, 2023**  
**Secretary of State**  
**2924360119CC**

**Entity Name:** MELANATED HOMESCHOOL COOPERATIVE INC

**Current Principal Place of Business:**

10313 BENEVA DR  
TAMPA, FL 33647

**Current Mailing Address:**

10313 BENEVA DR  
TAMPA, FL 33647

**FEI Number: 88-2483518**

**Certificate of Status Desired: Yes**

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

WILHOITE, SHAWNA D  
10313 BENEVA DR  
TAMPA, FL 33647 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            FD1  
Name            WILHOITE, SHAWNA D  
Address        10313 BENEVA DR  
City-State-Zip: TAMPA FL 33647

Title            FD2  
Name            ORR, CHRISTAN A  
Address        1637 CLIMBING DAYFLOWER DR  
City-State-Zip: RUSKIN FL 33573

Title            TREA  
Name            SMITH, TANISHA  
Address        11974 BRIGHTON KNOLL LOOP  
City-State-Zip: RIVERVIEW FL 33579

Title            SEC  
Name            ALI, KERRI  
Address        14402 AUDUBON TRACE  
City-State-Zip: TAMPA FL 33613

*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: TANISHA SMITH**

**TREASURER**

**03/02/2023**

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

\_\_\_\_\_  
Date