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: JACQUELINE VANDYKE

Electronic Signature of Signing Officer/Director Detail

Tit Na Ad

Title	P	Title	SEC
Name	VANDYKE, JACQUELINE MS.	Name	BALLANTYNE, TARA L MRS
Address	20 W. LYNNHAVEN PLACE	Address	7190 N. VARSITY AVE
City-State-Zip:	CITRUS SPRINGS FL 34434	City-State-Zip:	CITRUS SPRINGS FL 3443
Title	TRES		
Name	VAN DYKE, SHEILA A MRS.		
Address	20 W. LYNNHAVEN PLACE		
City-State-Zip:	CITRUS SPRINGS FL 34434		

Officer/Director Detail :

L

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

Current Mailing Address: 20 W. LYNNHAVEN PLACE

20 W. LYNNHAVEN PLACE CITRUS SPRINGS. FL 34434

DOCUMENT# N22000013367

CITRUS SPRINGS. FL 34434 US

Current Principal Place of Business:

FEI Number: 92-1267370

Name and Address of Current Registered Agent:

VANDYKE, JACQUELINE 20 W. LYNNHAVEN PLACE CITRUS SPRINGS, FL 34434 US

Entity Name: GULF COAST MANATEES HOMESCHOOL GROUP, INC

FILED Feb 16, 2024 Secretary of State 6088684892CC

Certificate of Status Desired: Yes

RS. 434

PRESIDENT

02/16/2024

Date

Date