

2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000003631

Entity Name: IMAGINE SCHOOLS NON-PROFIT, INC**Current Principal Place of Business:**1900 GALLOWS ROAD
SUITE 250
VIENNA, VA 22182**Current Mailing Address:**1900 GALLOWS ROAD
SUITE 250
VIENNA, VA 22182 US**FEI Number:** 20-3590526**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN STREET
SUITE #4
TALLAHASSEE, FL 32301 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	DIRECTOR	Title	CEO, PRESIDENT, CFO, TREASURER
Name	BAKKE, EILEEN	Name	SHARP, BARRY
Address	1900 GALLOWS ROAD SUITE 250	Address	1900 GALLOWS ROAD SUITE 250
City-State-Zip:	VIENNA VA 22182	City-State-Zip:	VIENNA VA 22182
Title	DIRECTOR	Title	DIRECTOR
Name	BEEHLER, ALEX	Name	NAILL, ROGER
Address	1900 GALLOWS ROAD SUITE 250	Address	1900 GALLOWS ROAD SUITE 250
City-State-Zip:	VIENNA VA 22182	City-State-Zip:	VIENNA VA 22182
Title	DIRECTOR	Title	DIRECTOR
Name	HAFT, ROBERT	Name	RUGGIRELLO, JOHN
Address	1900 GALLOWS ROAD SUITE 250	Address	1900 GALLOWS ROAD SUITE 250
City-State-Zip:	VIENNA VA 22182	City-State-Zip:	VIENNA VA 22182
Title	DIRECTOR	Title	SENIOR VP, SECRETARY
Name	TELLEZ, LUIS	Name	BERIO, ISABEL
Address	1900 GALLOWS ROAD SUITE 250	Address	1900 GALLOWS ROAD SUITE 250
City-State-Zip:	VIENNA VA 22182	City-State-Zip:	VIENNA VA 22182

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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: BARRY SHARP**PRESIDENT****03/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHIEF ACADEMIC OFFICER
Name HALL, NANCY
Address 1900 GALLOWS ROAD
SUITE 250
City-State-Zip: VIENNA VA 22182

Title DIRECTOR
Name BAKKE, DENNIS
Address 1900 GALLOWS ROAD
SUITE 250
City-State-Zip: VIENNA VA 22182

Title EXECUTIVE VICE PRESIDENT
Name LANGE, MONTY
Address 1900 GALLOWS ROAD
SUITE 250
City-State-Zip: VIENNA VA 22182

Title EXECUTIVE VICE PRESIDENT
Name TOLER, SHAWN
Address 1900 GALLOWS ROAD
SUITE 250
City-State-Zip: VIENNA VA 22182

Title VP
Name MCFADDEN, JAMES
Address 1900 GALLOWS ROAD
SUITE 250
City-State-Zip: VIENNA VA 22182

Title SR VP
Name CAGLE, RHONDA
Address 1900 GALLOWS ROAD
SUITE 250
City-State-Zip: VIENNA VA 22182

Title EXECUTIVE VICE PRESIDENT
Name BEATTY, DIANE
Address 1900 GALLOWS ROAD
SUITE 250
City-State-Zip: VIENNA VA 22182

Title EXECUTIVE VICE PRESIDENT
Name SASSE, ROD
Address 1900 GALLOWS ROAD
SUITE 250
City-State-Zip: VIENNA VA 22182

Title EXECUTIVE VICE PRESIDENT
Name UCHACZ, BRAD
Address 1900 GALLOWS ROAD
SUITE 250
City-State-Zip: VIENNA VA 22182

Title DIRECTOR
Name SARGEANT, KIMON
Address 1900 GALLOWS ROAD
SUITE 250
City-State-Zip: VIENNA VA 22182