

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000498

Entity Name: ALPHA SCHOOL, INC.

FILED
Jan 07, 2009
Secretary of State

Current Principal Place of Business:

2524 HARTSFIELD RD.
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

2524 HARTSFIELD RD.
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 59-3622879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARDNER, CHARLES
1300 THOMASWOOD DR.
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FLOM, JASON
Address: 1510 COLONIAL DR.
City-St-Zip: TALLAHASSEE, FL 32303

Title: DS () Delete
Name: WATSON, HANNA
Address: 685 FOREST RD.
City-St-Zip: HAVANA, FL 32333

Title: VD () Delete
Name: PATTERSON, FRANK
Address: 2413 OAKDALE ST
City-St-Zip: TALLAHASSEE, FL 32308

Title: D () Delete
Name: WELLS, BEVERLY
Address: 3128 ORTEGA DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: DT () Delete
Name: KIMELMAN, SAM
Address: 2913 BRANDEMERE DR
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOLMES, GEORGIANA
Address: 3998 CHINOOK ST.
City-St-Zip: TALLAHASSEE, FL 32303

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BEVERLY WELLS

D

01/07/2009

Electronic Signature of Signing Officer or Director

Date