

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000498

FILED  
Jan 06, 2010  
Secretary of State

Entity Name: ALPHA SCHOOL, INC.

**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  
Name: HOLMES, GEORGIANA  
Address: 3998 CHINOOK ST.  
City-St-Zip: TALLAHASSEE, FL 32303

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

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

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

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

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: BEVERLY WELLS

D

01/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date