

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004099

FILED
Jan 07, 2004
Secretary of State

Entity Name: LAKE GIBSON HIGH SCHOOL-ACADEMIC RESEARCH CHARTER SCHOOL, INC.

Current Principal Place of Business:

7007 N SOCRUM LOOP RD
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

7007 N SOCRUM LOOP RD
LAKELAND, FL 33809

New Mailing Address:

FEI Number: 59-3724667

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GILCHREST, RALPH A III
1910 CLUBHOUSE RD
LAKELAND, FL 33813 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: D () Delete
Name: STOER, PATRICIA A
Address: 4105 DERBY DR
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: WIGGS, R HOWARD
Address: 4602 HIGHLAND PLACE DR
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: GITHENS, STEVEN
Address: 1212 GEORGE JENKINS BLVD
City-St-Zip: LAKELAND, FL 33815

Title: D () Delete
Name: STROUSE, WILSON P
Address: 6306 CALUSA DR
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: UNDERWOOD, VIVIAN B
Address: 901 O'DONIEL DR
City-St-Zip: LAKELAND, FL 33809

Title: D () Delete
Name: MCCLELLAN, CECIL
Address: 7409 SUMMIT AVE.
City-St-Zip: LAKELAND, FL 33810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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
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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 for the exemption stated in Section 119.07(3)(i), 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: CECIL E. MCCLELLAN

D

01/07/2004

Electronic Signature of Signing Officer or Director

Date