2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2006 8:00 am Secretary of State

DOCUMENT # N0200003892 1. Entity Name THEODORE R. AND THELMA A. GIBSON CHARTER SCHOOL, INC.									04-12-2006 9	90093 00	2 ****70	.00
3629 GRAND AVENUE 6255				g Address BIRD ROAD II, FL 33155	·							
Principal Place of Business 3.			3. Mail	3. Mailing Address								
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.				04052006	Chg-NP	CR2E03	37 (11/05)	
City & State			Cit	City & State				4. FEI Number 02-06078	 395			oplied For of Applicable
Žip	Zip Country		Zip	Zip		ountry		5. Certificate of	Status Desired		\$8.75 Add	ditional
	6. Name	and Address of Curr	ent Registere	d Agent				7. Name and A	ddress of New R	Registered /	Agent	
ZULUETA, IGNACIO G ESQ.					Name							
6255 BIRD ROAD MIAMI, FL 33155						Street A	ddress ((P.O. Box Number	is Not Acceptable	e)		
					City					FL	Zip Cod	e
		ty submits this stateme	nt for the purp	ose of changing its	register	ed office or	registe	red agent, or both,	in the State of Flo		familiar with,	and accept
the obligat	tions of regis	tered agent.										
SIGNATURE .												
1	Signature, typed	for printed name of registered a	agent and title if app	ficable. (NOTE	E: Registere	d Agent signat.	ure required	d when reinstating)	<u> </u>	DATE		
	Filing Fe	t or printed name of registered and is \$61.25 Aay 1, 2006	agent and title if app	9. Election Car Trust Fund C	npaign F	inancing	ure required	\$5.00 May Be Added to Fees		flake checi	k payable t	
10.	Filing Fe	ne is \$61.25 May 1, 2006		9. Election Car	npaign F Contribut	inancing	0	\$5.00 May Be Added to Fees	Floi	lake checi rida Depar	tment of S	tate
10.	Filing Fe Due by M	e is \$61.25		9. Election Car	npaign F	inancing ion.		\$5.00 May Be Added to Fees ADDITIONS/CHAR	Floi NGES TO OFFICE	lake checi rida Depar	tment of S	tate
TITLE	Filing Fe Due by M	OFFICERS AND AN, EDITH ESQ. AND AVENUE		9. Election Car Trust Fund C	npaign F Contribut 11. TITU NAM STRE	inancing ion.	D G 2	\$5.00 May Be Added to Fees ADDITIONS/CHAP CP Sibson, Ch 801 Ponce	Flor NGES TO OFFICE Larles De Leon	Make check rida Depar ERS AND DII	tment of S	tate
TITLE NAME STREET ADDRESS	STD HOULIHA 3629 GRA MIAMI, FI D MATRTIN	OFFICERS AND OFFICERS AND AN, EDITH ESQ. AND AVENUE L 33133 HEZ, LISA V 125 TERRACE		9. Election Car Trust Fund C	TIPLE NAMES THE CALL	E E ET ADDRESS -ST-ZIP	D G 2 C D G	\$5.00 May Be Added to Fees ADDITIONS/CHAP CP Libson, Ch	Flor NGES TO OFFICE Larles De Leon Les, FL 3	Make check rida Depar RS AND DII 1 Blvd 3134 Gdith	tment of S	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	STD HOULIHA 3629 GRA MIAMI, FI D MATRTIN 12488 SV MIAMI, FI D WALLACI	OFFICERS AND OFFIC		9. Election Car Trust Fund C	TIPLE NAMES TREE CITY NAMES TR	E E E E E E E ADDRESS -ST-ZIP E E E -ST-ZIP E E E E TADDRESS -ST-ZIP E	D G 2 C D G 1 M D G 3	\$5.00 May Be Added to Fees ADDITIONS/CHAM CP ibson, Ch 801 Ponce oral Gabl TS eorgi Hou 320 NW 14 tiami, FL	AGES TO OFFICE MARIES DE Leon DES, FL 3 Milihan, E Th Stree 33125 Tonne Tigton Ave	Aske check rida Depar RS AND DII 1 Blvd 3134 Edith	TECTORS IN	1 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	STD HOULIHA 3629 GRA MIAMI, FI D MATRTIN 12488 SV MIAMI, FI D WALLACI 3629 GRA MIAMI, FI DP GIBSON,	OFFICERS AND OFFIC		9. Election Car Trust Fund C	TIPLE NAME STREE CITY TITLE NAME STREE CITY NAME STREET CITY NAME	E E E E ADDRESS -ST-ZIP E E E EET ADDRESS -ST-ZIP E E E SET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	DG 22 CD G1 1 M G3 3 M W 4 4	\$5.00 May Be Added to Fees ADDITIONS/CHAM CP CIBSON, Ch 801 Ponce Coral Gabl TS CEORGI HOU 320 NW 14 CHAMMI, FL CRASSIE, YV 916 Irvon CHAMMI, FL	ronne agton Ave 33123 Gandra	RS AND DIII Blvd 33134 Edith et	TRECTORS IN Change	Addition

12. I hereby certify that the information supplied with this filips does not enoughly for the exemptions contained 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 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 of flustee empowered to execute this report is required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an activess, with all effect like empowered.

STREET ADDRESS CITY-ST-ZIP

TITLE NAME

SIGNATURE

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

> SIGNATURE AND TYPED OR PRINTED NAME OF NG OFFICER OR DIRECTOR

☐ Delete

Daytime Phone #

☐ Change

Addition