

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004213

FILED
Feb 17, 2012
Secretary of State

Entity Name: COMPASS CHARTER MIDDLE SCHOOL, INC.

Current Principal Place of Business:

550 EAST CLOWER STREET
BARTOW, FL 33830

New Principal Place of Business:

Current Mailing Address:

550 EAST CLOWER STREET
BARTOW, FL 33830

New Mailing Address:

FEI Number: 01-0699969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, HARRY R
550 E CLOWER STREET
BARTOW, FL 33830 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: C
Name: BRONSON, TERRI
Address: 550 EAST CLOWER STREET
City-St-Zip: BARTOW, FL 33830 US

Title: P
Name: WILLIAMS, HARRY R
Address: 550 E CLOWER STREET
City-St-Zip: BARTOW, FL 33830 US

Title: D
Name: ALCORN, SHARON
Address: 550 E. CLOWER STREET
City-St-Zip: BARTOW, FL 33830 US

Title: S
Name: BARNES, RANDY
Address: 550 EAST CLOWER STREET
City-St-Zip: BARTOW, FL 33830 US

Title: D
Name: JAMES, SANDRA
Address: 550 E CLOWER STREET
City-St-Zip: BARTOW, FL 33830 US

Title: D
Name: BROWN, OTTO
Address: 550 EAST CLOWER STREET
City-St-Zip: BARTOW, FL 33830 US

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: HARRY WILLIAMS

PRES

02/17/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date