

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009083

FILED
Jan 17, 2012
Secretary of State

Entity Name: NEW ALTERNATIVE EDUCATION HIGH SCHOOL OF OSCEOLA COUNTY, INC.

Current Principal Place of Business:

301 SOUTHERN BOULEVARD
WEST PALM BEACH, FL 33405

New Principal Place of Business:

Current Mailing Address:

301 SOUTHERN BOULEVARD
WEST PALM BEACH, FL 33405

New Mailing Address:

FEI Number: 26-4274546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLAHR, JULIE F
GOREN, CHEROF DOODY & EZROI, P.A.
3099 EAST COMMERCIAL BLVD., SUITE 200
FORT LAUDERDALE, FL 33308 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
Name: RIVERA, DANIEL SR
Address: 5832 GUENEVERE COURT
City-St-Zip: ST. CLOUD, FL 34772

Title: CD
Name: GILLET, BRUCE
Address: 961 STARLING DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: DT
Name: SMITH, GARY
Address: 1000 W. OSCEOLA PARKWAY
City-St-Zip: KISSIMMEE, FL 34741

Title: D
Name: SIMO, FERNANDO
Address: 815 LAKE EVALYN DRIVE
City-St-Zip: CELEBRATION, FL 34747

Title: DV
Name: MCGOLDRICK, PATRICIA
Address: 33 BLAKE BLVD
City-St-Zip: CELEBRATION, FL 34747

Title: DS
Name: MACGREGOR, JAMES L
Address: 219 CELEBRATION BOULEVARD
City-St-Zip: CELEBRATION, FL 34747

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: BRUCE GILLET

C

01/17/2012

Electronic Signature of Signing Officer or Director

Date