NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N08734

1. Corporation Name

CHARLOTTE LOCAL EDUCATION FOUNDATION, INC.

Principal Place of Business
1016 EDUCATION AVE
Punta Gorda FL 33950
US

Mailing Address

P.O. BOX 511764 PUNTA GORDA FL 33951-1764

FILED Mar 22, 1999 8:00 am secretary of State

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25 29 30 Trust Fund Contribution Added to Fees 9. Name and Address of Current Registered Agent WOTITZKY, EDWARD L. 201 W MARION AVENUE, SUITE 301 PUNTA GORDA FL 33950 82 Street Address (P.O. Box Number is Not Acceptable) 83 Lip Code 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes SIGNATURE SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DODD, ANDREW STREET ADDRESS TITLE JODD, ANDREW STREET ADDRESS TITLE SD DELETE 11. TITLE SD CANDERBUILT AVENUE 1.3 STREET ADDRESS CITY-ST-ZIP PORT CHARLOTTE FL 1.4 CITY-ST-ZIP TITLE SD DELETE 2.1 TITLE Change Addition Addition Addition Addition
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14. If hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

941-637-8884