## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08734

FILED Apr 11, 2012 Secretary of State

Entity Name: CHARLOTTE LOCAL EDUCATION FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1445 EDUCATION WAY

PORT CHARLOTTE, FL 33948 US

Current Mailing Address: New Mailing Address:

1445 EDUCATION WAY

PORT CHARLOTTE, FL 33948 US

FEI Number: 59-2592844 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BYRSKI, MARY 230 BAL HARBOR BLVD PUNTA GORDA, FL 33950 US

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: PD

Name: BEERS, CHRISTOPHER

Address: 18501 MURDOCK CIRCLE, SUITE 404 City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VP

Name: PATAK, TYLER
Address: 2136 MCGREGOR BLVD.

City-St-Zip: FORT MYERS, FL 33901

Title: SEC

Name: GISSENDANNER, BETTY
Address: 23259 PAINTER AVE.

City-St-Zip: PORT CHARLOTTE, FL 33954

Title: TR

Name: RUPPERT, RICHARD

Address: 19501 COCHRAN BLVD. SUITE 15 City-St-Zip: PORT CHARLOTTE, FL 33948

Title: ED

 Name:
 CLEMMONS, MARY

 Address:
 1445 EDUCATION WAY

 City-St-Zip:
 PORT CHARLOTTE, FL 33948

Title: PF

 Name:
 EMILY, LEWIS

 Address:
 1050 LOVELAND BLVD.

 City-St-Zip:
 PORT CHARLOTTE, FL 33980

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: MARY CLEMMONS ED 04/11/2012