N09000003590

•	
(Requestor's Name)	
(Address)	
(Addiess)	
(Address)	
(City/State/Zip/Phone #)	—
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	—
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
<u> </u>	

Office Use Only



400159326494

08/27/09--01042--018

¥43, 75

O9 AUG 27 PM 12: 51

AMENMENT 8

 $\mathbb{D}_{\mathbb{C}}$

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Imani Elemen	tary Charter Academy,	Inc.
DOCUMENT NUM	BER: N0900003590		
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		ick C. Coggins	
	(Name of	Contact Person)	
	c/o Imani Elementa	ary Charter Academy, Inc.	
	(Firm	n/ Company)	
	140 Sad	Idlebrook Way	
	(,	Address)	
	DeLar	id, FL 32724	
		te and Zip Code)	
	PASA1 E-mail address: (to be use	63@aol.com d for future annual report notific	ration)
For further information	on concerning this matter, pleas	e call:	
Dr. Patrick C. Co	ggins	at (561 ₎ 707-076	
(Name	of Contact Person)	at (561) 707-076 (Area Code & Dayti	me Telephone Number)
Enclosed is a check f	or the following amount made p	ayable to the Florida Departmen	nt of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle



Imani Elementary Charter Academy, Inc.

2704 Rew Circle
Suite 105F
Ocoee, Florida 34761
Office#: (561) 707-0766
Fax#: (407) 573-1193
Email: Imanicharter@AOL.Com

August 25, 2009

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

To: Amendment Section
Division of Corporations

This is to request that upon approval of the amendments and changes to the Certificate of Incorporation to please forward a rush certified copy by fax to me at:

Dr. Patrick C. Coggins 140 Saddlebrook Way DeLand, FL 32724

My fax number is 386-943-8075 or 407-573-1193

I thank you in anticipation for your able and timely assistance in this matter.

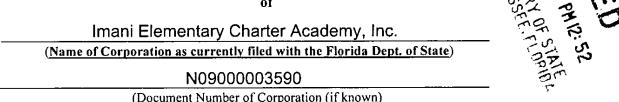
Respectfully submitted,

De Patrick Coffens

Dr. Patrick C. Coggins

Vice President & Registered Agent

Articles of Amendment to **Articles of Incorporation** of



If amending name, enter the new name of	of the corporatio	<u>n:</u>	
	N/A		<u> </u>
e new name must be distinguishable and c breviation "Corp." or " Inc." <u>"Company"</u>			
Enter new principal office address, if aprincipal office address MUST BE A STREE		N/A	<u></u>
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		N/A	
If amonding the verictored agent and/on	registered office	address in Florida	anter the name of the
If amending the registered agent and/or new registered agent and/or the new reg			enter the name of the
	istered office add		enter the name of the
new registered agent and/or the new reg	istered office add	dress:	enter the name of the
new registered agent and/or the new reg	istered office add	dress: o Change	enter the name of the
<u>Name of New Registered Agent:</u>	istered office add	dress: o Change 4 Rew Circle	<u></u>
<u>Name of New Registered Agent:</u>	istered office add	dress: o Change 4 Rew Circle da street address)	enter the name of the , Florida 34761 (Zip Code)
Name of New Registered Agent:	istered office add	dress: o Change 4 Rew Circle ida street address) Ocoee (City)	 , Florida_34761

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Secret	Mrs. Melviona Thomson	1195 Heidi Ct. DeLand, FL 32720	_ ☑ Add □ Remove
Memb	Mr. William Kerns	424 S. Elliot Ave. Sanford, Fl. 32771	_ ☑ Add _ ☐ Remove
Treas	Pastor Winston Wiggan	3801 Sea Island Ct. Orlando, FL 32808 See Attachment 1 for rest of cha	_ ☑ Add □ □ Remove
(attach add	ng or adding additional Articles, ente litional sheets, if necessary). (Be spec Non-Discrimination Policy		
Section 1:	The Charter School shall not disc	riminate against any individua	student,
parent, gro	up, entity, or organization based	on language, race, religion, eti	nnicity,
socioecono	mic status, exceptionality, or any	other distinguishing character	istics.
Section 2: T	The Charter School shall comply	with any and all State and fede	eral laws with
respect to r	on-discrimination in the operation	n of charter schools. These lav	vs will include
but not limit	ed to Florida Statute 1005.05, Fe	ederal Law Title VII, title IX, 94	-142, IDEA,
and Florida	Statute 1005.05 discrimination a	gainst students and employee	s in Florida K-20
public educ	ation system.		
Section 3: 1	The school will incorporate these	and other non-discrimination I	aws in the
	policies and all of the operations of		
	administration, operation, sports		
See Attach	ment 2 changes to Article V, Sec	tion I	
, .			

The date of each amendmen	t(s) adoption: 5/17/09 - Amendment XII; 8/16/09 - Amendment V
· Effective date if applicable:	(date of adoption is required) 5/17/09 - Amendment XII; 8/16/09 - Amendment V
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_8/24	
Signature _	De Patrick C. Collins
hav	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator — if in the hands of a receiver, trustee, of er court appointed fiduciary by that fiduciary)
	Dr. Patrick C. Coggins
	(Typed or printed name of person signing)
	Vice President
	(Title of person signing)

ATTACHMENT 1

NAME OF CORPORATION: Imani Elementary Charter Academy, Inc.

DOCUMENT NUMBER: N09000003590

If amending the officers and/or directors, enter the title and name of each officer/director being removed and title, name, address of each Officer and/or Director being added.

TITLE	<u>NAME</u>	ADDRESS	TYPE OF ACTION
Treasurer	Dr. Keith Daly	1257 Reagan's Reserve Blvd. Apopka, FL 32712	□Add ☑Remove
Member	Dr. Keith Daly	1257 Reagan's Reserve Blvd. Apopka, FL 32712	☑Add □Remove
Secretary	Pastor Winston Wiggan	3801 Sea Island Ct. Orlando, FL 32808	□Add ☑Remove
Member	Dr. Aldrin E. Sweeney	1215 Honey Road Apopka, FL 32712	☑Add □Remove

ATTACHMENT 2

ARTICLE V NAMES, ADDRESSES, TITLE OF DIRECTORS/OFFICERS

Section 1: The names, addresses and titles are:

Name	Title	Address	Phone Number
Dr. Barry Daly	President	1607 Shonnora Dr. Gotha, FL 34734	321-436-8445
Dr. Patrick Coggins	Vice President (Signing Agent)	140 Saddlebrook Way DeLand, FL 32712	561-707-0766
Mrs. Melviona Thomson	Secretary	1195 Heidi Ct. Deland, FL 32720	386-785-5306
Pastor Winston Wiggan	Treasurer	3801 Sea Island Ct. Orlando, FL 32808	407-497-7649

Dr. Keith Daly	Member	1257 Reagan's Reserve Blvd. Apopka, FL 32712	321-356-9352
Mr. William Kerns	Member	424 S. Elliott Avenue Sanford, FL 32771	407-416-5873
Mr. Steve Walker	Member -	6155 West Gate Drive Orlando, Florida 32835	407-538-7462
Mrs. Annabelle Daly	Member	8 Sterling Brown Apopka, FL 32703	407-886-8170
Dr. Aldrin E. Sweeney	Member	1215 Honey Road Apopka, FL 32712	407 886 0468