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FILED

Feb 18 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N93000004974 (2)

1. Corporation Name

CHARLOTTE COUNTY SCHOOL SYSTEM ADMINISTRATORS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3818 WHIPPOORWILL BLVD.  
PUNTA GORDA FL 33950

3818 WHIPPOORWILL BLVD.  
PUNTA GORDA FL 33950



3. Date Incorporated or Qualified

11/04/1993

4. FEI Number

65-0578310

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KIAH, DON DR.  
3818 WHIPPOORWILL BLVD.  
PUNTA GORDA FL 33950

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip 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 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 VD  
NAME KEHRER, CAROL  
STREET ADDRESS 410 GARVIN ST  
CITY - ST - ZIP PUNTA GORDA FL  
☐ DELETE

1.1 TITLE VTD  
1.2 NAME PAIMER, TERRY  
1.3 STREET ADDRESS 401 CAICOS DRIVE  
1.4 CITY - ST - ZIP PUNTA GORDA, FL  
☐ Change ☒ Addition

TITLE PD  
NAME SULLIVAN, CHARLES  
STREET ADDRESS 7427 SNOW DR  
CITY - ST - ZIP ENGLEWOOD FL  
☒ DELETE

2.1 TITLE PD  
2.2 NAME KEHRER, CAROL  
2.3 STREET ADDRESS 410 GARVIN STREET  
2.4 CITY - ST - ZIP PUNTA GORDA, FL  
☒ Change ☐ Addition

TITLE SD  
NAME ALLAN, KAREN  
STREET ADDRESS 2278 NUREMBERG BLVD  
CITY - ST - ZIP PUNTA GORDA FL  
☒ DELETE

3.1 TITLE SD  
3.2 NAME GORTON, CAROLYN  
3.3 STREET ADDRESS 971 FAIRFAX TERR  
3.4 CITY - ST - ZIP PORT CHARLOTTE, FL  
☒ Change ☐ Addition

TITLE D  
NAME KIAH, DON DR  
STREET ADDRESS 3818 WHIPPOORWILL BLVD.  
CITY - ST - ZIP PUNTA GORDA FL 33950  
☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE TD  
NAME BRASSEUR, FRANCIS  
STREET ADDRESS 20207 RUTHERFORD AVE  
CITY - ST - ZIP PORT CHARLOTTE FL  
☒ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE D  
NAME DI GRAZIA, DONNA  
STREET ADDRESS 12521 MARINA CLUB DR  
CITY - ST - ZIP FT MYERS FL  
☒ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP  
☐ Change ☐ Addition

14. I 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.

SIGNATURE: Terry Palmer 2-10-98 (941) 639-3671

CR2E037 (1097)