## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #	N94000001747
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1. Corporation Name

ORANGE AVENUE CHARTER SCHOOL, INC.

Principal Place of Business
921 ORANGE AVENUE
FORT PIERCE FL 34950

2. Principal Place of Business

Suite, Apt. #, etc.

21

Mailing Address

921 ORANGE AVENUE FORT PIERCE FL 34950

2a. Mailing Address

Suite, Apt. #, etc.

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## **FILED** May 07, 1999 8:00 am = Secretary of State

05-07-1999 90006 002 \*\*\*\*61.25

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3. Date incorporated or Qualifed

04/08/1994

4. FEI Number

2		27				65-0440395		Not	Applicable -	
City & State City & State								\$8.75 A	dditional	
m - 17 - 17 - 17 - 17 - 17 - 17 - 17 - 1						5. Certifcate of Status Desired		Fee Red	uired	
Zip	Country	Zip	Coul	ntrv		6. Election Campaign Financing		\$5.00	Jav Re	
- Z.P	25	29	¬			Trust Fund Contribution		Added to		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
	J. Hame and Addition of Californ	Togiotorea rigeria		81 N	Name		<del></del>			
				82 Street Address (P.O. Box Number is Not Acceptable)						
INGRAM, JONATHAN REV. 921 ORANGE AVENUE FORT PIERCE FL 34950										
				83			<del></del>	<del></del>		
				03				_		
			ì	84 (	City			85 Zip C	ode	
				<u>L</u>			<u> </u>			
11. Pursuant	to the provisions of Sections 617.0502 egistered agent, or both, in the State of	and 617.1508, Florida	Statutes, the at	bove-n	amed corporation	ation submits this statement for the s board of directors. I hereby accer	purpose of c ot the appoint	nanging its i ment as red	egistered istered	
agent. La	n familiar with, and accept the obligat	ons of, Section 617.05	03, Florida Statu	ites.	- 50.P0(dd0)	2 2224 5: 20022		1.0		
SIGNATURE	Les Quetes	trees m					4/2	7/9/		
SIGNATORE	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Registered	Agent sig	gnature required w		DATE		20.01.40	
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OF	FICERS AND			
TITLE	SD	<b>☑</b> DEL	1.1 TR	TLE .	T			Change	Addition	
NAME	ALSTAN,:KATIE		1.2 NA	ME	MI	ke Swanson				
STREET ADDRESS	1502 N 23RD STREET		1.3 ST	REETAD	DORESS 12	55 SW MAPLE WORT ST. LUCIE, FL	OD DR	•		
CITY-ST-ZIP	FT PIERCE FL 34958	,	1.4 CT	TY-ST-Z	IP PO	RT ST. LUCIE, FL	34980	2		
TITLE	TD	Z DEL	ETE 2.1 T(1	2.1 TITLE		D ·		Change	Addition	
NAME	-CLARK, DONNIE		2.2 NA	ME.	ALS	A N. 23rd ST				
STREET ADDRESS	-912-N 21ST STREET		2.3 ST	REET AD	DRESS 150	a N. 23rd ST			_	
	FT-PIERGE-FL-34950			ITY-ST-Z	TIP FT	PIERCE, FL 349:	58	_	-	
CITY-ST-ZIP TITLE	D.	DEL			<u> </u>			Change	Addition	
	BYRD-FARR, EHTEL	<del>-</del>			Řv	PD-FAPR FThel				
NAME			3.2.15	DCCT 80	1071	RD-FARR, EThel HILTON DR				
STREET ADDRESS	103 HILTON DRIVE				ET.	PIERCE, FL 349.	50			
CITY-ST-ZIP	FT PIERCE FL 34950	DEL		TY-ST-Z	A V .	FIERCE FL JTT		Change	☐ Addition	
TITLE	D CONTRACTOR	LI VEL				District Ala				
NAME	GREEN, RONNIE		4.2 N	AME	MI	DDLETON, Cleon 3 N. 14th ST RTPIERCE, FL				
STREET ADDRESS	1604 N 44TH STREET		4.3 ST	REETAD	DORESS 1/60	3 70 14 11 01	340.	<u> </u>		
CITY-ST-ZIP '	FT PIERCE FL 34947		4.4 CF		IP FO	KI FIERCE, LL	3443	<u> </u>	□ A449!	
TITLE	D	DEL DEL			l			Change	Addition	
NAME	MIDDLETON, CLEON		5.2 NA		]					
STREET ADDRESS	1603 N 14TH STREET		5.3 \$1	REET AL	DDRESS					
CITY-ST-ZIP	FT PIERCE FL 34950		5.4 CI	TY-ST-Z	UP					
TITLE		☐ DEL	ETE 6.1 π	TLE				☐ Change	☐ Addition	
NAME			6.2 N	ME.						
STREET ADDRESS			6.3 ST	REETAC	ODRESS					
			6.4 CF	TY-ST-Z	UP					
CITY-ST-ZIP	pertify that the information supplied with	h this filing does not gu				ction 119 07/3)(i) Florida Statutes.	I further cert	fy that the in	formation	

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:

Applied For