ZUU4 NUT-FUR-FRUFIT UURFURATIUN ANNUAL REPORT

FILED Jan 20, 2004 8:00 am DOCUMENT # N96000000488 Secretary of State CHARLOTTE COUNTRY DAY SCHOOL, INC. 01-20-2004 90054 015 ****61.25 Principal Place of Business Mailing Address 365 ORLANDO BLVD 365 ORLANDO BLVD PORT CHARLOTTE, FL 33954 PORT CHARLOTTE, FL 33954 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01072004 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number Applied For 65-0661754 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ... 7. Name and Address of New Registered Agent --WAKSLER, GERI L Street Address (P.O. Box Number is Not Acceptable) 1625 WEST MARION AVE. SUITE 2 PUNTA GORDA, FL City Zip Code Fl 8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE ☐ Delete TITLE Treasurer Change Addition COWARD, DOROTHY rontree, NAME NAME 7 Jan Mateu 17000 BURNT STORE RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PUNTA GORDA, FL 33955 CITY-ST-ZIP Punta Gorda, FL 33950 TITLE Delete TITLE Addition AMONTREE, JAMES NAME NAME Mac Arthur Drive 1117 SAN MATEO DRIVE STREET ADDRESS STREET ADDRESS harlotte FL 33954 PUNTA GORDA, FL 33950 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Addition WYNN, KATHY NAME Jolunga, Franciscourt NAME 3972 CROOKED ISLAND DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PUNTA GORDA, FL 33950 CITY-ST-ZIP inta Gorda. 33950 TITLE Change TITLE Delete ☐ Addition COLUNGA, FRANK NAME NAME STREET ADDRESS STREET ADDRESS 2015 EL CERITO CT PUNTA GORDA, FL 33950 CITY-ST-ZIP CITY-ST-ZIP ta Gorda. ŊΡ rector TITLE ☐ Delete TITLE Change Addition QUINN, JAMES NAME ugas. Donald NAME STREET ADDRESS 2000 JAMAICA WAY STREET ADDRESS Deborat Dr CITY-ST-ZIF PUNTA GORDA, FL 33950 CITY-ST-ZIP 33950 TITLE DΥ TITLE rectoi ☐ Change Addition Delete

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

LACK, MICHAEL

24140 TREASURE ISLAND BLVD.

PUNTA GORDA, FL 33955

INTED NAME OF SIGNING OFFICER OF DIRECTOR

Charlotte,

FL

Additional Directors - Charlotte Academy: FEI: 65-0661754

Hachment N96000000488 ---- 65-0661754 44002986

Director Waksler, Geri 160 Heron's Cove Drive Port Charlotte, FL 33983

Director

(New Director)

Katz, Todd

1490 Tamiami Trail

Port Charlotte, FL-33948-