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Feb 27 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N96000002257 (1)

1. Corporation Name

INTERNATIONAL BACCALAUREATE FOUNDATION OF CHOCTA  
WHATCHEE HIGH SCHOOL, INC.

Principal Place of Business

Mailing Address

110 N.W. RACETRACK ROAD  
FORT WALTON BEACH FL 32547110 N.W. RACETRACK ROAD  
FORT WALTON BEACH FL 32547-1604

3. Date Incorporated or Qualified

04/23/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLEET, H. BART  
1201 EGLIN PARKWAY  
SHALIMAR FL 32579

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 D ☐ DELETENAME FLEET, TISHA  
STREET ADDRESS 657 FAIRWAY AVENUE  
CITY - ST - ZIP FORT WALTON BEACH FL 325471.1 TITLE ☐ Change ☐ Addition

NAME FLEET, TISHA

STREET ADDRESS 657 FAIRWAY AVENUE

CITY - ST - ZIP FORT WALTON BEACH FL 32547

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE D ☐ DELETENAME NABORS, BONNIE  
STREET ADDRESS 17 LONGWOOD DRIVE  
CITY - ST - ZIP SHALIMAR FL 325792.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE D ☐ DELETENAME HAIK, BILLY  
STREET ADDRESS 243 YACHT CLUB DRIVE  
CITY - ST - ZIP FORT WALTON BEACH FL 325473.1 TITLE Vice President V/D ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE D ☐ DELETENAME DARNELL, SHARILYN  
STREET ADDRESS 1 LONGWOOD DRIVE  
CITY - ST - ZIP SHALIMAR FL 325794.1 TITLE President P/D ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE D ☐ DELETENAME HAMBY, DENNIS S  
STREET ADDRESS 7 DORAL DRIVE  
CITY - ST - ZIP SHALIMAR FL 325795.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE D ☐ DELETENAME DELAUNE, BETSY  
STREET ADDRESS 643 N.E. MERIONETH COURT  
CITY - ST - ZIP FORT WALTON BEACH FL 325476.1 TITLE Secretary S/D ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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:

Signature and typed or printed name of signing officer or director

SHARILYN DARNELL

Date

2/18/97

Daytime Phone

904-651-1298

CR2E037 (9/96)

7.1 TITLE	T/D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
7.2 NAME	BLACK, FAYE	
7.3 STREET ADDRESS	306 NE YACHT CLUB DRIVE	
7.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32548	
8.1 TITLE	V/D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
8.2 NAME	MARY K. HAIK	
8.3 STREET ADDRESS	243 YACHT CLUB DRIVE	
8.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32548	
9.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
9.2 NAME	DOHENY, MAUREEN	
9.3 STREET ADDRESS	18 PARADISE POINT ROAD	
9.4 CITY-ST-ZIP	SHALIMAR, FL 32579	
10.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
10.2 NAME	SILVESTER, JANET	
10.3 STREET ADDRESS	46 HUME DRIVE	
10.4 CITY-ST-ZIP	HURLBURT FIELD, FL 32544	
11.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
11.2 NAME	ABBOTT, CATHY	
11.3 STREET ADDRESS	231 NE YACHT CLUB DRIVE	
11.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32548	
12.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
12.2 NAME	BARKER, GENE	
12.3 STREET ADDRESS	809 WOODBRIAR CT.	
12.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32547	
13.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
13.2 NAME	CHANDLER, ED	
13.3 STREET ADDRESS	404 BARATARIA LANE	
13.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32547	
14.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
14.2 NAME	MADDEN, LISA	
14.3 STREET ADDRESS	321 NE YACHT CLUB DRIVE	
14.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32548	
15.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
15.2 NAME	DECOTIS, ANTHONY	
15.3 STREET ADDRESS	1201 N. EGLIN PARKWAY	
15.4 CITY-ST-ZIP	SHALIMAR, FL 32579	
16.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
16.2 NAME	WAYWELL, DAVID	
16.3 STREET ADDRESS	128 CECELIA DRIVE	
16.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32548	

17.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
17.2 NAME	MARSHALL, DEBBIE	
17.3 STREET ADDRESS	9 BAYSHORE DRIVE	
17.4 CITY-ST-ZIP	SHALIMAR, FL 32579	
18.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
18.2 NAME	NATION, LUCY	
18.3 STREET ADDRESS	736 MAYFLOWER AVENUE	
18.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32547	
19.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
19.2 NAME	STEPHENS, HELEN	
19.3 STREET ADDRESS	818 MEADOW LANE	
19.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32547	
20.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
20.2 NAME	REVILL, SAM	
20.3 STREET ADDRESS	42 COUNTRY CLUB DRIVE	
20.4 CITY-ST-ZIP	SHALIMAR, FL 32579	
21.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
21.2 NAME	PHILLIPS, JOHN	
21.3 STREET ADDRESS	P.O. BOX 1361 - N/A	
21.4 CITY-ST-ZIP	DESTIN, FL 32540	
22.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
22.2 NAME	POOLE, SARAH	
22.3 STREET ADDRESS	6 COUNTRY CLUB COURT	
22.4 CITY-ST-ZIP	SHALIMAR, FL 32579	
23.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
23.2 NAME	NEALE, WILLIAM	
23.3 STREET ADDRESS	128 NE EGLIN PARKWAY	
23.4 CITY-ST-ZIP	FT. WALTON BEACH, FL 32548	
24.1 TITLE	D	<input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> ADDITION
24.2 NAME	BRADLEY, JOHN	
24.3 STREET ADDRESS	3 PALM SPRINGS COURT	
24.4 CITY-ST-ZIP	SHALIMAR, FL 32579	