

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003194

1. Entity Name

ESCAMBIA CHARTER SCHOOL, INC.

FILED
Jan 22, 2000 8:00 am
Secretary of State

01-22-2000 90031 022 ****61.25

Principal Place of Business

Mailing Address

391 9089 RANCH RD.
CANTONMENT FL 32533
US

P.O. BOX 1147
GOZALEZ FL 32560-1147
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc:

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3381523

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6.-Name and Address of Current Registered Agent--

7. Name and Address of New Registered Agent

LOOMIS, GEORGE E
201 EAST GOVERNMENT STREET
PENSACOLA FL 32501

Name

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

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CD ☐ Delete
NAME HICKS, LARRY K
STREET ADDRESS 316 BAYLAN ST SUITE 250
CITY-ST-ZIP PENSACOLA FL 32501

TITLE D ☒ Change ☐ Addition
NAME HICKS, LARRY K
STREET ADDRESS 316 BAYLEN STREET 250
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE VCD ☐ Delete
NAME MORRISON, ROBERT N
STREET ADDRESS 1461 ROLLING OAKS DR.
CITY-ST-ZIP MOLINO FL 32577

TITLE CD ☒ Change ☐ Addition
NAME MORRISON, ROBERT N
STREET ADDRESS 1461 ROLLING OAKS DRIVE
CITY-ST-ZIP MOLINO, FL 32577

TITLE TD ☐ Delete
NAME HUFFMAN, ROGER
STREET ADDRESS 180 N. PALAFOX ST.
CITY-ST-ZIP PENSACOLA FL 32501

TITLE VCD ☐ Change ☒ Addition
NAME WEAVER, NAN
STREET ADDRESS 4300 BAYOU BLVD, SUITE 17C
CITY-ST-ZIP PENSACOLA, FL 32504

TITLE SD ☐ Delete
NAME KILLAM, TULLULAN
STREET ADDRESS 3406 CHANTARENE RD.
CITY-ST-ZIP PENSACOLA FL 32507

TITLE D ☐ Change ☒ Addition
NAME BELL, REED
STREET ADDRESS 97 SHORLINE DRIVE
CITY-ST-ZIP GULF BREEZE, FL 32561

TITLE P ☐ Delete
NAME CALLENDER, STAN
STREET ADDRESS P.O. BOX 1147
CITY-ST-ZIP GONZALEZ FL 32560

TITLE D ☐ Change ☒ Addition
NAME BROWN, EUGENE
STREET ADDRESS 29 SOUTH SPRING STREET
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE MD ☐ Delete
NAME CALLENER, STAN
STREET ADDRESS P.O. BOX 1147
CITY-ST-ZIP GONZALEZ FL 32560

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/00

Date

(850) 957-0500

Daytime Phone #

CP2E037 (9/99)