

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003194

FILED
Jan 14, 2004
Secretary of State**Entity Name:** ESCAMBIA CHARTER SCHOOL, INC.**Current Principal Place of Business:**391 90&9 RANCH RD.
CANTONMENT, FL 32533 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 1147
GOZALEZ, FL 32560 US**New Mailing Address:****FEI Number:** 59-3381523**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LOOMIS, GEORGE E
811 NORTH SPRING STREET
PENSACOLA, FL 32501 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VCD () Delete
Name: WEAVER, NAN
Address: 10137 BOWMAN AVE.
City-St-Zip: PENSACOLA, FL 32534

Title: CD (X) Delete
Name: MORRISON, ROBERT N
Address: 1461 ROLLING OAKS DR.
City-St-Zip: MOLINO, FL 32577

Title: TSD () Delete
Name: HUFFMAN, ROGER
Address: 180 N. PALAFOX ST.
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: BLACKBURN, REX
Address: 1501 GOLDENROD ROAD
City-St-Zip: CANTONMENT, FL 32533

Title: P () Delete
Name: CALLENDER, STAN
Address: P.O. BOX 1147
City-St-Zip: GONZALEZ, FL 32560

Title: MD () Delete
Name: CALLENER, STAN
Address: P.O. BOX 1147
City-St-Zip: GONZALEZ, FL 32560

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: SMITH, JACQUELYN
Address: 10333 EDENDALE LANE
City-St-Zip: CANTONMENT, FL 32533

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STAN CALLENDER

P

01/14/2004

Electronic Signature of Signing Officer or Director

Date