

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 13, 2006 8:00 am**  
**Secretary of State**

02-13-2006 90018 006 \*\*\*\*70.00

DOCUMENT # N96000003194

1. Entity Name  
ESCAMBIA CHARTER SCHOOL, INC.



Principal Place of Business  
391 90&9 RANCH RD.  
CANTONMENT, FL 32533 US

Mailing Address  
P.O. BOX 1147  
GOZALEZ, FL 32560 US



02092006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
59-3381523

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CALLENDER, STAN  
P.O. BOX 1147  
GOZALEZ, FL 32560

7. Name and Address of New Registered Agent

Name Jerome Chisolm

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

391 90 + 9 Ranch Rd

City Cantonment

FL

Zip Code  
32533

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

Jerome K. Chisolm

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

(NOTE: Registered Agent signature required when reinstating)

2/9/06

DATE

Filing Fee is \$61.25  
Due by May 1, 2006

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE CD ☐ Delete  
NAME SMITH, JACQUELYN  
STREET ADDRESS 10333 EDENDALE LANE  
CITY-ST-ZIP CANTONMENT, FL 32533

TITLE VCD ☐ Delete  
NAME BROWN, EUGENE  
STREET ADDRESS 29 SOUTH SPRING STREET  
CITY-ST-ZIP PENSACOLA, FL 32501

TITLE STD ☐ Delete  
NAME TOMKINSON, BRENDA  
STREET ADDRESS 1415 WALBLER TERRACE  
CITY-ST-ZIP CANTONMENT, FL 32533

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

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

TITLE D ☒ Delete  
NAME MCGRUDER, CASSIE  
STREET ADDRESS 710 BOXWOOD DRIVE  
CITY-ST-ZIP PENSACOLA, FL 32503

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition  
NAME Cindy Hasty  
STREET ADDRESS 5292 Crystal Creek Dr  
CITY-ST-ZIP Pace, FL 32571

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

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

TITLE P ☐ Change ☒ Addition  
NAME Jerome K. Chisolm  
STREET ADDRESS P.O. Box 1147  
CITY-ST-ZIP Gonzalez, FL 32560

TITLE MD ☐ Change ☒ Addition  
NAME Jerome K Chisolm  
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 exemptions contained in Chapter 119, 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:

Jerome K. Chisolm

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jerome K. Chisolm

Date

2/9/06

Daytime Phone #

(850) 937-0500