2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002266

Entity Name: LAKE EOLA CHARTER SCHOOL, INC.

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business:			New Prir	New Principal Place of Business:	
135 NORT	H MAGNOLIA), FL 32801232	AVENUE		•	
Current Mailing Address:			New Mai	New Mailing Address:	
	H MAGNOLIA), FL 3280123				
FEI Number:	59-3506369	FEI Number Applied For ()	FEI Number Not Ap	pplicable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name an	nd Address of New Registered Agent:	
2111 LAKE ORLANDC	, MICHAEL A SIDE DRIVE , FL 34803 named entity s	US submits this statement for the pu	irpose of changing	g its registered office or registered agent, or both,	
	of Florida.	•			
SIGNATUF	RE:				
Electronic Signature of Registered Agent			nt	Date	
OFFICERS	AND DIREC	TORS:	ADDITIC	ONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () FREDERICK, C 605 E ROBINSO ORLANDO, FL	ON ST #420	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () STUCKER, RON 605 E ROBOINS ORLANDO, FL	SON ST #420	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition STUCKER, RON 55 W. PINELOCH AVE. CORLANDO, FL 32806 US	
Title: Name: Address: City-St-Zip:	TD () EARLY, LISA 923 GOLFVIEW ORLANDO, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () DENOIA, VERO 135 N MAGNOL ORLANDO, FL	IA AVENUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () COLEMAN, MIC 2111 LAKESIDI ORLANDO, FL	E DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DIERKING, JEA 1000 AAA DR HEATHROW, F		Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: VERONICA DENOIA SD 04/20/2006