

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006907

FILED  
Jan 31, 2011  
Secretary of State

**Entity Name:** LAKE WALES HIGH SCHOOL ACADEMIC FOUNDATION, INC.

**Current Principal Place of Business:**

#1 HIGHLANDER WAY  
LAKE WALES, FL 33853

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 931  
LAKE WALES, FL 33859

**New Mailing Address:**

**FEI Number:** 59-3549882

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CRAIG, EVI  
#1 HIGHLANDER WAY  
LAKE WALES, FL 33853 US

**Name and Address of New Registered Agent:**

WAID, CAROL  
#1 HIGHLANDER WAY  
LAKE WALES, FL 33853 US

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: CAROL WAID

01/31/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NELSON, KELLY D  
Address: 1090 COUNTRY LAKE CIRCLE  
City-St-Zip: LAKE WALES, FL 33898 US

Title: S  
Name: MCKENNA, MELODY N  
Address: 3604 RED OAK COURT  
City-St-Zip: LAKE WALES, FL 33853 US

Title: VP  
Name: THOMPSON, KRISTA L  
Address: 895 COUNTRY LAKE CIRCLE  
City-St-Zip: LAKE WALES, FL 33898 US

Title: T  
Name: WAID, CAROL  
Address: 218 JACKSON STREET  
City-St-Zip: LAKE WALES, FL 33859 US

I hereby 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 all other like empowered.

SIGNATURE: CAROL WAID

T

01/31/2011

Electronic Signature of Signing Officer or Director

Date