


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90341 020 ****61.25

DOCUMENT # N99000004188 1. Entity Name PROVIDENCE COMMUNITY SCHOOL, INC.					
Principal Place of Business 5512 26TH STREET WEST BRADENTON, FL 34207			Mailing Address 5512 26TH STREET WEST BRADENTON, FL 34207		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03192005 Chg-NP CR2E037 (10/03)	
4. FEI Number 65-0932239				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KING, DAVID L 2217 46TH ST CT W BRADENTON, FL 34209			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KING, DAVID L 2217 46TH ST CT W BRADENTON, FL 34209	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KING, JULIE M 2217 46TH ST CT W BRADENTON, FL 34209	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, JOHN O 7932 OAK GROVE CIRCLE SARASOTA, FL 34243	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MILLER, ANITA 7932 OAK GROVE CIRCLE SARASOTA, FL 34243	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERSCHBERGER, VERN 4903 29TH AVE DR W BRADENTON, FL 34209	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERSCHBERGER, KIM 4903 29TH AVE DR W BRADENTON, FL 34209	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ARFONS, ERIC 2982 WILDERNESS BOULEVARD EAST PARISH, FLORIDA 34219	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY BENHAM, CHARLES 6005 38TH AVENUE EAST BRADENTON, FLORIDA 34208-6671	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR HARDY, REBECCA 3503 17TH STREET EAST BRADENTON, FLORIDA 34208	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR KARNES, DAVID 3982 PALAU DRIVE SARASOTA, FLORIDA 34241	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR SHAREK, STAN 3610 67TH STREET COURT EAST BRADENTON, FLORIDA 34208	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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: <i>D. Eric Arfons</i>		4/1/05 941-776-5445 <small>Date Daytime Phone #</small>			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					