2020 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N10000000825

Entity Name: CITY OF BELLE ISLE CHARTER SCHOOLS, INC.

FILED Nov 11, 2020 **Secretary of State** 6340415554CR

Current Principal Place of Business:

5903 RANDOLPH AVENUE BELLE ISLE, FL 32809

Current Mailing Address:

6340 SUNSET DRIVE MIAMI, FL 33143 US

FEI Number: 27-2154495 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BELLE ISLE FL 32809

CORPORATION SERVICE COMPANY 1947 LEE ROAD WINTER PARK, FL 32789 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: CARINA L DUNLAP, ASST VICE PRESIDENT

11/11/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

City-State-Zip:

Title	DIRECTOR, CHAIRMAN	Title	DIRECTOR
Name	BROOKS, WILLIAM G	Name	ADY, MARC

Address 5903 RANDOLPH AVENUE Address 5903 RANDOLPH AVENUE BELLE ISLE FL 32809 City-State-Zip: City-State-Zip: BELLE ISLE FL 32809

Title DIRECTOR, VC Title DIRECTOR, TREASURER Name LANDT, CAROLINE Name COLPITTS, CHERYL

Address 5903 RANDOLPH AVENUE Address 5903 RANDOLPH AVENUE BELLE ISLE FL 32809 City-State-Zip: City-State-Zip: BELLE ISLE FL 32809

NON-VOTING MEMBER Title Title **DIRECTOR** Name FOURAKER, NICHOLAS VYAS, SHARON DR. Name Address 5903 RANDOLPH AVENUE 5903 RANDOLPH AVENUE Address City-State-Zip: BELLE ISLE FL 32809

Title DIRECTOR Title SECRETARY, DIRECTOR

Name CROSS, CHARLYNE VAN DYKE, KEITH DR. Name

5903 RANDOLPH AVENUE Address 5903 RANDOLPH AVENUE Address City-State-Zip: BELLE ISLE FL 32809 City-State-Zip: BELLE ISLE FL 32809

Continues on page 2

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.

11/11/2020 SIGNATURE: WILLIAM BROOKS **CHAIRMAN**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name ARMSTEAD, RALPH

Address 5903 RANDOLPH AVENUE
City-State-Zip: BELLE ISLE FL 32809