

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000001193

**Entity Name:** OAKSTONE ACADEMY PALM BEACH CORPORATION**Current Principal Place of Business:**345 SO. MILITARY TRAIL  
SCHOOL ADMINISTRATION OFFICE  
WEST PALM BEACH, FL 33415**Current Mailing Address:**345 SO. MILITARY TRAIL  
SCHOOL ADMINISTRATION OFFICE  
WEST PALM BEACH, FL 33415 US**FEI Number:** 27-4878735**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**RAAB, JASON V  
345 SO. MILITARY TRAIL  
SCHOOL ADMINISTRATION OFFICE  
WEST PALM BEACH, FL 33415 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |  |
|-----------------|--|
| Title           | PRESIDENT  |
| Name            | JOHNSON, RUSSELL MR.                                   |
| Address         | 345 SO. MILITARY TRAIL<br>SCHOOL ADMINISTRATION OFFICE |
| City-State-Zip: | WEST PALM BEACH FL 33415                               |

|                 |  |
|-----------------|--|
| Title           | DIRECTOR   |
| Name            | WAITERS, WALI MR.                                      |
| Address         | 345 SO. MILITARY TRAIL<br>SCHOOL ADMINISTRATION OFFICE |
| City-State-Zip: | WEST PALM BEACH FL 33415                               |

|                 |  |
|-----------------|--|
| Title           | SECRETARY  |
| Name            | RODRIGUEZ, JOSE LUIS MR                                |
| Address         | 345 SO. MILITARY TRAIL<br>SCHOOL ADMINISTRATION OFFICE |
| City-State-Zip: | WEST PALM BEACH FL 33415                               |

|                 |  |
|-----------------|--|
| Title           | TREASURER  |
| Name            | RAAB, JASON MR.  |
| Address         | 345 SO. MILITARY TRAIL<br>SCHOOL ADMINISTRATION OFFICE |
| City-State-Zip: | WEST PALM BEACH FL 33415                               |

|                 |  |
|-----------------|--|
| Title           | DIRECTOR   |
| Name            | RUBEN, SHAWN MR.                                       |
| Address         | 345 SO. MILITARY TRAIL<br>SCHOOL ADMINISTRATION OFFICE |
| City-State-Zip: | WEST PALM BEACH FL 33415                               |

*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:** JASON V. RAAB**TREASURER****01/31/2014**

Electronic Signature of Signing Officer/Director Detail

Date