

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004107

Entity Name: CORNERSTONE CLASSICAL EDUCATION FOUNDATION CORP.

Current Principal Place of Business:

1093 A1A BEACH BLVD #321
ST. AUGUSTINE, FL 32080-6733

Current Mailing Address:

1093 A1A BEACH BLVD #321
ST. AUGUSTINE, FL 32080-6733

FEI Number: 46-2086804

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KORACH, WILLIAM
1093 A1A BEACH BLVD #321
ST. AUGUSTINE, FL 32080-6733 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 D
Name KORACH, WILLIAM
Address 406 MISTY MORNING LN
City-State-Zip: ST. AUGUSTINE FL 32080

Title D
Name CROSS, DENISE
Address 875 GRAYBAR COURT
City-State-Zip: JACKSONVILLE FL 32221

Title D
Name MESKEL, TINA
Address 8936 WESTERN WAY
City-State-Zip: JACKSONVILLE FL 32256

Title D
Name MERCKEL, JERRY DR
Address 4390 TRADEWINDS DRIVE
City-State-Zip: JACKSONVILLE FL 32250

Title D
Name CAPRA, JOHN R
Address 193 ST. JOHNS FOREST BLVD
City-State-Zip: ST JOHNS FL 32259

Title D
Name ANTHONY , MALCOLM
Address 313 N. SHIPWRECK AVE
City-State-Zip: PONTE VEDRA FL

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: WILLIAM KORACH

CEO

03/24/2016

Electronic Signature of Signing Officer/Director Detail

Date