

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000003309

Entity Name: CHAMBERLAIN HIGH SCHOOL LEGACY ALLIANCE, INC.**Current Principal Place of Business:**9401 NORTH BLVD
TAMPA, FL 33612**Current Mailing Address:**9401 NORTH BLVD
TAMPA, FL 33612 US**FEI Number: 83-4278546****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARDNER, MERRITT A
5415 MARINER STREET, STE 200
TAMPA, FL 33609 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 DIR
Name SUE BROWN, BETTY
Address 9401 NORTH BLVD
City-State-Zip: TAMPA FL 33612

Title DIR
Name MOSGAARD, TIFFANY
Address 9401 NORTH BLVD
City-State-Zip: TAMPA FL 33612

Title DIR
Name CAPPADORO, ANTHONY
Address 9401 NORTH BLVD
City-State-Zip: TAMPA FL 33612

Title DIR
Name JUSTO IDZIAK, NICOLE
Address 9401 NORTH BLVD
City-State-Zip: TAMPA FL 33612

Title DIR
Name MARSHALL, RANDALL
Address 9401 NORTH BLVD
City-State-Zip: TAMPA FL 33612

Title DIR
Name RAINES, SUSAN
Address 9401 NORTH BLVD
City-State-Zip: TAMPA FL 33612

Title PRESIDENT
Name SISCO, TERRY L
Address 9401 NORTH BLVD
City-State-Zip: TAMPA FL 33612

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: TERRY SISCO**PRESIDENT****04/07/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date