

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000543

Entity Name: THE CARING AND SHARING LEARNING SCHOOL, INC.

Current Principal Place of Business:

1951 SE 4TH ST
GAINESVILLE, FL 32641

Current Mailing Address:

1951 SE 4TH ST
GAINESVILLE, FL 32641

FEI Number: 59-3519552

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PETERSON, CURTIS W
3432 N.W. 52ND AVE.
GAINESVILLE, FL 32605 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: CURTIS PETERSON

01/09/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DC
Name JACKSON, CHARLIE
Address 2708 NW 170 ST
City-State-Zip: NEWBERRY FL 32669

Title D
Name JOHNSON, Verna J
Address 3432 NW 52 AVE
City-State-Zip: GAINESVILLE FL 32605

Title S
Name HAYES, LIZBETH C
Address 5811 N. W. 38TH PLACE
City-State-Zip: GAINESVILLE FL 32606

Title D
Name JOHNSON, SIMON OAOM
Address 3432 N.W. 52ND AVE.
City-State-Zip: GAINESVILLE FL 32605

Title OTHER
Name JACKSON, WALTER
Address 3434 N. W. 52 AVE
City-State-Zip: GAINESVILLE FL 32605

Title TREASURER
Name RENTZ, DELORIS
Address P.O. BOX 1444
City-State-Zip: ALACHUA FL 32616

Title OTHER
Name TERRELL, ANGIE
Address 4508 E. UNIVERSITY AVE
City-State-Zip: GAINESVILLE FL 32641

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: CHARLIE JACKSON

BOARD CHAIR

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date