2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N98000000543

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

FILED
Oct 05, 2018
Secretary of State
CC9357595736

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 4505 S.W. 82 PLACE GAINESVILLE, FL 32608 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 10/05/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DC Title S

NameJACKSON, CHARLIENameHAYES, LIZBETH CAddress2708 NW 170 STAddress5811 N. W. 38TH PLACECity-State-Zip:NEWBERRY FL 32669City-State-Zip:GAINESVILLE FL 32606

TREASURER Title Title **OTHER** Name RENTZ, DELORIS JACKSON, WALTER Name Address P.O. BOX 1444 Address 3434 N. W. 52 AVE City-State-Zip: ALACHUA FL 32616 City-State-Zip: GAINESVILLE FL 32605

Title OTHER Title OTHER

Name TERRELL, ANGIE Name PETERSON, CURTIS WENDELL

Address 4508 E. UNIVERSITY AVE Address 4505 S.W. 82 PLACE
City-State-Zip: GAINESVILLE FL 32641 City-State-Zip: GAINESVILLE FL 32608

Title OTHER Title OTHER

NameJOHNSON, VERNANameWILSON, ERNESTAddress3432 N.W. 52 AVEAddress4922 N. W. 37TH DR.City-State-Zip:GAINESVILLE FL 32605City-State-Zip: GAINESVILLE FL 32605

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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: CURTIS WENDELL PETERSON PRINCIPAL 10/05/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title OTHER

NameRICHARDSON, JERRIAddress522 S.E. 47TH TERR.City-State-Zip:GAINESVILLE FL 32641