

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 01, 2009
Secretary of State

DOCUMENT# N08000001672

Entity Name: ADVANTAGE ACADEMY OF HILLSBOROUGH, INC.**Current Principal Place of Business:**4300 N. UNIVERSITY DRIVE
C-201
SUNRISE, FL 33351**New Principal Place of Business:****Current Mailing Address:**4300 N. UNIVERSITY DRIVE
C-201
SUNRISE, FL 33351**New Mailing Address:****FEI Number:** 26-2955088**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**CHARTER SCHOOL ASSOCIATES, INC.
4300 N. UNIVERSITY DRIVE
C-201
SUNRISE, FL 33351 US**Name and Address of New Registered Agent:**

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

OFFICERS AND DIRECTORS:**Title:** C () Delete
Name: JORDAN, MARK F
Address: 5415 SHAKESPEARE DRIVE
City-St-Zip: DOVER, FL 33527 US**Title:** TREA () Delete
Name: SHUCKER, JUDY
Address: 7950 N. SILVERADO CIRCLE
City-St-Zip: HOLLYWOOD, FL 33024 US**Title:** SECY () Delete
Name: HUFFMAN, JAMES R
Address: 750 STONEWYK WAY
City-St-Zip: KISSIMMEE, FL 34744 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** C (X) Change () Addition
Name: GRASCH, NATHANIEL
Address: 4300 N. UNIVERSITY DRIVE, SUITE C-201
City-St-Zip: SUNRISE, FL 33351 US**Title:** TREA (X) Change () Addition
Name: SHUCKERS, JUDY
Address: 4300 N. UNIVERSITY DRIVE, SUITE C-201
City-St-Zip: SUNRISE, FL 33351 US**Title:** SECY (X) Change () Addition
Name: HUFFMAN, JAMES R
Address: 4300 N. UNIVERSITY DRIVE, SUITE C-201
City-St-Zip: SUNRISE, FL 33351 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: NATHANIEL GRASCH

C

04/01/2009

Electronic Signature of Signing Officer or Director

Date