

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006979

FILED
Apr 09, 2007
Secretary of State

Entity Name: EDVENTURE CHARTER SCHOOL INC.

Current Principal Place of Business:

115 EAST COAST AVENUE
HYPOLUXO, FL 33462

New Principal Place of Business:

Current Mailing Address:

115 EAST COAST AVENUE
HYPOLUXO, FL 33462

New Mailing Address:

FEI Number: 65-0802918 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SQUATRITO, ANGELO V
115 EAST COAST AVENUE
HYPOLUXO, FL 33462 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: PC () Delete
Name: EVERHART, CANDICE L.
Address: 825 CENTER ST #4-C
City-St-Zip: JUPITER, FL 33458

Title: VPD (X) Delete
Name: EVERHART, CANDICE L.
Address: 825 CENTER ST #4-C
City-St-Zip: JUPITER, FL 33458

Title: TD () Delete
Name: LANDY, PATRICK
Address: 6261 WINDCHIME PL
City-St-Zip: BOYNTON BEACH, FL 33437

Title: SD () Delete
Name: GOODMAN, ROBERT
Address: 7554 CHARING CROSS LANE
City-St-Zip: DELRAY BEACH, FL 33446

Title: D () Delete
Name: MILES, MIKE DR
Address: 1700 SOUTH OCEAN BLVD #5
City-St-Zip: DELRAY BEACH, FL 33483

Title: D () Delete
Name: TEPsic, PAM
Address: 3300 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: MILES, MICHAEL DR.
Address: 1700 SOUTH OCEAN BLVD. #5
City-St-Zip: DELRAY BEACH, FL 33483

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SQUATRITO, ANGELO
Address: 171 SPYGLASS LANE
City-St-Zip: JUPITER, FL 33477

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANGELO V. SQUATRITO

DIR

04/09/2007

Electronic Signature of Signing Officer or Director

Date