

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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REGISTERED AGENT CHANGE

FLORIDA CHARTER EDUCATIONAL FOUNDATION, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

NOV **09** 2011

EXAMINER

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

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4	FOR CORTORATIONS	
Pursuant to the	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of FLORIDA	
	order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	of the corporation: The Florida Charter Educational Foundation, Inc.	
2. The princip	pal office address: 6245 North Federal Highway, 5th Floor	
Fort Lau	uderdale, FL 33308	
3. The mailing	ng address (if different):	
4. Date of ince	corporation/qualification: October 2, 2000 Document number: N00000006526	5
	and street address of the current registered agent and registered office on file with the epartment of State: (If resigned, enter resigned)	
	Edward J. Pozzuoli, Esq.	
	c/o Tripp Scott, P.A., 110 SE 6th Street, 15th Floor	•
	Fort Lauderdale, FL 33301	A
6. The name a (if changed)	and street address of the new registered agent (if changed) and for registered office	NON .
	C T Corporation System, Inc.	-9
	1200 South Pine Island Road P.O. Box NOT upupuble	PH
	Displation CL 20004	30 es
الالمان عاداً المالاً	dress of its registered office and the street address of the business office of its registered agen	-
as changed wi	vill be identical.	,
Such change vauthorized by	was authorized by resolution duly adopted by its board of directors or by an officer so y the board, or the corporation has been notified in writing of the change.	
Idm	Ken Haiko, President Nature of an officer of girector Printed or typed name and fille	_
Signs Signs		
I further agree of my duties, c document is b (corporation h	ept the appointment as registered agent and agree to act in this capacity. ee to comply with the provisions of all statutes relative to the proper and complete performan and I am familiar with and accept the obligation of my position as registered agent. Or, if th being filed merely to reflect a change in the registered office address, I hereby confirm that th has been notified in writing of this change.	ce iis ie
Treas	Signature of Registered Agent Date	-
If signing on t	behalf of an entity: Madonna Cuddihy Special Assistant Secretary	
	Typed or Printed Name	
	* * * FILING FEL: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSHE, FL 32314
CR2E045 (8/05)