2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 396255

1. Entity Name
CHAMPAGNAT CATHOLIC SCHOOL, INC.

Principal Place of Business	Mailing Address
2609 N.W. 7TH STREET MIAMI, FL 33125	2609 N.W. 7TH STREET MIAMI, FL 33125

DO NOT WRITE IN THIS SPACE

04212008   No Chg-P   CR2E034 (11/05)

4. FEI Number 59-1403980	Applied For
	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ALONSO, REINALDO F.
2609 N.W. 7TH ST.
MIAMI, FL 33125

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _Reinaldo Alonso Reinaldo Alonso_   _04/29/08_
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	PD
NAME	ALONSO, REINALDO F.
STREET ADDRESS	2609 N.W. 7TH STREET
CITY-ST-ZIP	MIAMI, FL
TITLE	SD
NAME	ALONSO, MARIA I.
STREET ADDRESS	2609 N.W. 7TH STREET
CITY-ST-ZIP	MIAMI, FL
TITLE	T
NAME	ALONSO, RAFAEL
STREET ADDRESS	2609 N.W. 7TH STEEET
CITY-ST-ZIP	MIAMI, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/28/08-80097-012 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _Reinaldo Alonso Reinaldo Alonso 04/29/08, 305-642-4132_
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #