

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 24, 2001 08:00 AM****Secretary of State****DOCUMENT # L00000004603**1. Entity Name
CHARTER SCHOOLS USA AT MCCULLOUGH, L.C.

Principal Place of Business	Mailing Address
6245 N FEDERAL HWY 5TH FLOOR FT LAUDERDALE FL 33309	6245 N FEDERAL HWY 5TH FLOOR FT LAUDERDALE FL 33309

2. Principal Place of Business	3. Mailing Address
6245 NORTH FEDERAL HIGHWAY	6245 NORTH FEDERAL HIGHWAY

Suite, Apt. #, etc.	Suite, Apt. #, etc.
5TH FLOOR	5TH FLOOR

City & State	City & State
FT LAUDERDALE FL	FT LAUDERDALE FL

Zip	Country	Zip	Country
33308		33308	

4. FEI Number	Applied For
65-1007299	Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentPOZZUOLI EDWARD JESQ
C/O TRIPP SCOTT PA
110 SE 6TH STREET 15TH FLOOR
FT LAUDERDALE FL 33301 US**7. Name and Address of New Registered Agent**

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE _____ DATE **02/24/2001**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State**9. MANAGING MEMBERS / MEMBERS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
MGRM	CHARTER SCHOOLS USA, INC	6245 NORTH FEDERAL HIGHWAY, 5TH FLOOR	FORT LAUDERDALE FL 33308		
MGRM	HAGE JONATHAN K	6245 NORTH FEDERAL HIGHWAY, 5TH FLOOR	FORT LAUDERDALE FL 33308		
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Change	<input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JONATHAN K HAGE MGRM 02/24/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)