

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006526

FILED
Jan 27, 2010
Secretary of State

Entity Name: THE HOMESTEAD CHARTER FOUNDATION, INC.

Current Principal Place of Business:

6245 NORTH FEDERAL HIGHWAY
5TH FLOOR
FORT LAUDERDALE, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

6245 NORTH FEDERAL HIGHWAY
5TH FLOOR
FORT LAUDERDALE, FL 33308 US

New Mailing Address:

FEI Number: 31-1748540 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

POZZUOLI, EDWARD J ESQ
C/O TRIPP SCOTT PA
110 SE 6TH STREET 15TH FLOOR
FORT LAUDERDALE, FL 33301 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: DC
Name: GOLD, COREY
Address: 975 BAPTIST WAY
City-St-Zip: HOMESTEAD, FL 33033

Title: D
Name: TAM, TRACI
Address: 915 N.W. 20TH STREET
City-St-Zip: HOMESTEAD, FL 33030 US

Title: D
Name: FOX, LINDSAY
Address: 455 N.W. 21ST STREET
City-St-Zip: HOMESTEAD, FL 33030 US

Title: DVP
Name: MAAS, JOHN P
Address: 44 NE 16TH STREET
City-St-Zip: HOMESTEAD, FL 33030 US

Title: D
Name: HELMS, JENNIFER
Address: 21840 S.W. 258TH STREET
City-St-Zip: HOMESTEAD, FL 33031

Title: D
Name: WELLS, MARGARET
Address: 533 N.W. 14TH STREET
City-St-Zip: HOMESTEAD, FL 33030

I hereby 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 all other like empowered.

SIGNATURE: LORRIE DAVIDSON

VP

01/27/2010

Electronic Signature of Signing Officer or Director

Date