2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005
Secretary of State

DOCUMENT# N01000004938

Entity Name: CHARTER SCHOOLHOUSE SERVICES, INC.

Current Principal Place of Business:

2580 METROCENTRE BOULEVARD
6
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 3254
W PALM BCH, FL 334023254

New Mailing Address:

FEI Number: 65-1120888 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLIGAN, ALPHONSO S
2580 METROCENTRE BOULEVARD
6
WEST PALM BEACH, FL 33407 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: D ( ) Delete
Name: MILLIGAN, ALPHONSO S PRES
Address: P.O. BOX 3254
City-St-Zip: WEST PALM BEACH, FL 33402

Title: D ( ) Delete
Name: MILLIGAN, ANGEL SEC/TRE
Address: P.O. BOX 211796
City-St-Zip: ROYAL PALM BEACH, FL 33421

Title: D ( ) Delete
Name: MILLIGAN, CHRISTIAN R
Address: P.O. BOX 211796
City-St-Zip: ROYAL PALM BEACH, FL 33421

Title: D ( ) Delete
Name: MILLIGAN, HALLE B
Address: P.O. BOX 211796
City-St-Zip: ROYAL PALM BEACH, FL 33421

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ( ) 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 Section 119.07(3)(i), 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: ALPHONSO S. MILLIGAN PRES 04/30/2005

Electronic Signature of Signing Officer or Director — Date