2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000004938

Entity Name: CHARTER SCHOOLHOUSE SERVICES, INC.

FILED May 01, 2003 Secretary of State

Current Principal Place of Business:

STE 201 4600 E PARK DR
PALM BCH GARDENS, FL 33410

New Principal Place of Business:

2580 METROCENTRE BOULEVARD
6

WEST PALM BEACH, FL 33407

Current Mailing Address: New Mailing Address:

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

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MILLIGAN, ALPHONSO S
STE 201 4600 E PARK DR
PALM BCH GARDENS, FL 33410

MILLIGAN, ALPHONSO S
2580 METROCENTRE BOULEVARD
6
WEST PALM BEACH, FL 33407

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: 05/01/2003

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MILLIGAN, ALPHONSO S
 Name:
 MILLIGAN, ALPHONSO S

 Address:
 STE 201 4600 E PARK DR
 Address:
 P.O. BOX 3254

City-St-Zip: PALM BCH GARDENS, FL 33410 City-St-Zip: WEST PALM BEACH, FL 33402

Title: D () Delete Title: () Change () Addition

 Name:
 JACKSON, TERESA
 Name:

 Address:
 805 SOUTH B STREET
 Address:

 City-St-Zip:
 LAKE WORTH, FL 33460
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 RODNEY, JOANNE
 Name:

 Address:
 6221 WEST BROWARD BOULEVARD
 Address:

 City-St-Zip:
 PLANTATION, FL 33317
 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 05/01/2003