2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 19, 2002
Secretary of State

DOCUMENT# N01000005500

Entity Name: EXCELSIOR CHARTER, INC.

Current Principal Place of Business:

1226 CORDOVA ST
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

1226 CORDOVA ST
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-1147597 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIFORD, ELENA M
1226 CORDOVA ST
CORAL GABLES, FL 33134

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: RAM, BRYNA
Address: 5851 SW 94TH ST
City-St-Zip: MIAMI, FL 33156

Title: D ( ) Delete
Name: RODRIGUEZ-BOWER, ALICIA
Address: 5601 SW 116TH CT, UNIT 406
City-St-Zip: MIAI, FL 33173

Title: D ( ) Delete
Name: VALDES, EDITH
Address: 5417 SW 91ST AVE
City-St-Zip: MIAMI, FL 33165

Title: D ( ) Delete
Name: WILLIFORD, ELENA M
Address: 1226 CORDOVA ST
City-St-Zip: CORAL GABLES, FL 33134

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: ELENA M. WILLIFORD D 09/19/2002
Electronic Signature of Signing Officer or Director — Date