

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000002328

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** CATHOLIC VIRTUAL SCHOOLS, INC.

**Current Principal Place of Business:**

3406 ROSE HILL WAY  
FORT LAUDERDALE, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

3406 ROSE HILL WAY  
FORT LAUDERDALE, FL 33319

**New Mailing Address:**

**FEI Number:** 02-0578010

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRAUN, JANINE  
3406 ROSE HILL WAY  
FORT LAUDERDALE, FL 33319 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:** PD  
**Name:** BRAUN, JEROME R  
**Address:** 3406 ROSE HILL WAY  
**City-St-Zip:** FORT LAUDERDALE, FL 33319

**Title:** VSTD  
**Name:** BRAUN, JANINE  
**Address:** 3406 ROSE HILL WAY  
**City-St-Zip:** FORT LAUDERDALE, FL 33319

**Title:** D  
**Name:** BRAUN, THERESA  
**Address:** 3406 ROSE HILL WAY  
**City-St-Zip:** FORT LAUDERDALE, FL 33319

**Title:** D  
**Name:** BRAUN, JUSTIN  
**Address:** 3406 ROSE HILL WAY  
**City-St-Zip:** FORT LAUDERDALE, FL 33319

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:** JANINE BRAUN

VSTD

04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date