

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006137

FILED
Apr 21, 2006
Secretary of State

Entity Name: ROSA PARKS CHARTER SCHOOLS, INC.

Current Principal Place of Business:

3050 BISCAYNE BLVD
STE 501
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

3050 BISCAYNE BLVD
STE 501
MIAMI, FL 33137

New Mailing Address:

FEI Number: 35-2211674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BECKER, BENTON L
1491 LA COSTA DRIVE EAST
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

BECKER, BENTON L
6892 ADRIANO DR
BOYNTON BEACH, FL 33437 US

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: _____

04/21/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: COLEMAN, HERBERT J
Address: 3050 BISCAYNE BLVD STE 501
City-St-Zip: MIAMI, FL 33137

Title: CD () Delete
Name: LEONARD, JACK
Address: 18820 SW 355TH AVE
City-St-Zip: FLORIDA CITY, FL 33034

Title: D () Delete
Name: BECKER, BENTON L
Address: 1491 LA COSTA DRIVE EAST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: VD () Delete
Name: ALTIDOR, MAGDALENE
Address: 3050 BISCAYNE BLVD STE 504
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: CARRILLO, LYNN
Address: 1 SE 3RD AVE 28TH FLOOR
City-St-Zip: MIAMI, FL 33131

Title: SD () Delete
Name: MELLERSON, PATRICIA
Address: 224 WASHINGTON AVE
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BECKER, BENTON L
Address: 6892 ADRIANO DR
City-St-Zip: BOYNTON BEACH, FL 33437

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 Chapter 119, 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: HERBERT J. COLEMAN

PD

04/21/2006

Electronic Signature of Signing Officer or Director

Date