2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006586

FILED Jan 12, 2009 Secretary of State

Entity Name: SOUTH TECH CHARTER ACADEMY, INC.

Current Principal Place of Business: New Principal Place of Business: 1300 SW 30TH AVE. BOYNTON BEACH, FL 33426 **Current Mailing Address: New Mailing Address:** 1300 SW 30TH AVE BOYNTON BEACH, FL 33426 FEI Number: 32-0089102 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: KIDD, JAMES R 1300 SW 30TH AVE BOYNTON BEACH, FL 33426 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BENNER, WALTER Name: Name: 9034 SW 5TH ST Address: Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: Title: Title: VC () Delete (X) Change () Addition BROENING, GERALD Name: BAIZE, DONNA Name: Address: 820 NORTH RD Address: 886 GARNETT STREET City-St-Zip: BOYNTON BEACH, FL 33435 City-St-Zip: LANTANA, FL 33462 Title: () Delete Title: () Change () Addition KIDD, JAMES R Name: Name: Address: 1300 S.W. 30TH AVE. Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: (X) Change () Addition Title: COB () Delete Title: COB Name: HOWELL, ROBERT Name: LEWIS, CATHERINE Address: 899 S.W. 16TH ST Address: 7329 SERRANO TERRACE City-St-Zip: BOCA RATON, FL 33486 City-St-Zip: DELRAY BEACH, FL 33446 Title: () Delete Title: (X) Change () Addition LEWIS, CATHERINE BLESHMAN, NORMAN Name: Name: 7329 SERRAMO TERRACE 9954 HARBOUR LAKE CIRCLE Address: Address: City-St-Zip: DELRAY BEACH, FL 33446 City-St-Zip: BOYNTON BEACH, FL 33437 Title: () Delete Title: () Change () Addition JOHNSON, MARGARET Name: Name: Address: 2108 SW 14 PLACE Address: BOYNTON BEACH, FL 33426 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JAMES R KIDD P 01/12/2009