

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007732

FILED
Apr 08, 2009
Secretary of State

Entity Name: BOCA RATON CHARTER SCHOOL, INC.

Current Principal Place of Business:

269 NE 14TH STREET
BOCA RATON, FL 33432 US

New Principal Place of Business:

Current Mailing Address:

269 NE 14TH STREET
BOCA RATON, FL 33432 US

New Mailing Address:

FEI Number: 92-0189820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NASH-UTTERBACK, DEBORAH K
414 NW 35TH ST
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

NASH-UTTERBACK, DEBORAH K
269 NE 14TH STREET
BOCA RATON, FL 33432 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:

04/08/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FREE, BIVIAN
Address: 5120 NW 11TH DR
City-St-Zip: DEERFIELD BEACH, FL 33064 US

Title: VPD () Delete
Name: ALFONSO, LOUIS
Address: 370 CAMINO GARDENS BLVD SUITE 346
City-St-Zip: BOCA RATON, FL 33432 US

Title: T () Delete
Name: LOMBARD, CHERYL
Address: 753 BAYBERRY TERRACE
City-St-Zip: BOCA RATON, FL 33486

Title: S (X) Delete
Name: CUNNINGHAM, BEVERLY
Address: 2196 WEST MARINA PALM DR
City-St-Zip: BOCA RATON, FL 33432

Title: D (X) Delete
Name: LOUVET, TINA
Address: 8694 ESCONDIDO WAY EAST
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: NASH-UTTERBACK, DEBORAH
Address: 1295 NE 4TH CT
City-St-Zip: BOCA RATON, FL 33432 US

Title: T (X) Change () Addition
Name: LOUVET, TINA
Address: 8694 ESCONDIDO WAY EAST
City-St-Zip: BOCA RATON, FL 33433

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 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: BIVIAN FREE

PD

04/08/2009

Electronic Signature of Signing Officer or Director

Date