2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001689

Entity Name: LEE CHARTER ACADEMY, INC.

FILED Feb 19, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

154 NW MAGNOLIA LAKES BLVD. 3637 DR. MARTIN LUTHER KING JR., BLVD. PORT ST. LUCIE, FL 34986 FORT MYERS, FL 33916

Current Mailing Address: New Mailing Address:

P.O. BOX 881237 7100 ARENAL LANE PORT ST. LUCIE, FL 34988 CARLSBAD, CA 92009

FEI Number: 20-0767574 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:

GOTZ, MARK H

154 NW MAGNOLIA LAKES BLVD.

PORT ST. LUCIE, FL 34986 US

CONSUEGRA, JERRY

5232 26TH AVE. SOUTH

GULFPORT, FL 33707 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: GERRY CONSUEGRA 02/19/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change () Addition SHOEMAKER, VERONICA Name: Name: 3637 DR. MARTIN LUTHER KING JR. BLVD Address: Address: City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: Title: Title: (X) Change () Addition () Delete MILLER, TONY Name: DOUGLAS, CLARENE Name: Address: 3637 DR. MARTIN LUTHER KING JR. BLVD Address: 10100 MCGREGOR BLVD

City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: FORT MYERS, FL 33919

Title: S () Delete Title: DIR (X) Change () Addition Name: ROBINSON, BEVERLY ROBINSON, BEVERLY

Address: 3637 DR. MARTIN LUTHER KING JR. BLVD Address: 2356 BARDEN ST. APT. A

City-St-Zip: FORT MYERS, FL 33916 City-St-Zip: FORT MYERS, FL 33916

Title: () Delete Title: DIR () Change (X) Addition Name: POWELL, CALETHA Address: 2050 TIGER FLOWERS DRIVE

City-St-Zip: City-St-Zip: ATLANTA, GA 30314

Title: () Delete Title: DIR () Change (X) Addition

 Name:
 Name:
 LAKE, EDDIE REV

 Address:
 Address:
 2754 ORANGE AVE.

 City-St-Zip:
 City-St-Zip:
 FORT MYERS, FL 33916

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: VERONICA SHOEMAKER P 02/19/2008