

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007462

FILED  
Apr 30, 2005  
Secretary of State

Entity Name: BIOTECH LEARNING CHARTER SCHOOL, INC.

**Current Principal Place of Business:**

P.O. BOX 3254  
WEST PALM BEACH, FL 334023254

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3254  
WEST PALM BEACH, FL 334023254

**New Mailing Address:**

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

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

MILLIGAN, ALPHONSO S ESQ  
2580 METROCENTRE BLVD  
SUITE 6  
WEST PALM BEACH, FL 33407 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: D ( ) Delete  
Name: DUNCAN, BERNARD  
Address: 2040 GREENVIEW SHORES BLVD #203  
City-St-Zip: WELLINGTON, FL 334142729

Title: D ( ) Delete  
Name: THOMPSON, WINSTON  
Address: 13311 SW 102ND AVE  
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D ( ) Delete  
Name: MILLIGAN, ALPHONSO S  
Address: P.O. BOX 3254  
City-St-Zip: WEST PALM BEACH, FL 334023254

**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: BERESFORD, CAROL  
Address: 312 RIVER DRIVE  
City-St-Zip: TEQUESTA, FL 33469

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CAROL BERESFORD

SEC

04/30/2005

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

\_\_\_\_\_  
Date