

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Feb 27, 2006
Secretary of State

DOCUMENT# N05000009851

Entity Name: WEST BROWARD ELEMENTARY CHARTER SCHOOL, INC.**Current Principal Place of Business:**4364 NW 103RD TERRACE
SUNRISE, FL 33351**New Principal Place of Business:****Current Mailing Address:**4364 NW 103RD TERRACE
SUNRISE, FL 33351**New Mailing Address:****FEI Number:** 20-3539985**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RENNA, RONALD P
4364 NW 103RD TERRACE
SUNRISE, FL 33351 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:** PRES () Delete
Name: RENNA, TONI M
Address: 4364 NW 103RD TERRACE
City-St-Zip: SUNRISE, FL 33351**Title:** DIR () Delete
Name: STRADER, MICHAEL
Address: 10320 NW 6TH STREET, SUITE 100
City-St-Zip: CORAL SPRINGS, FL 33071**Title:** SECT () Delete
Name: RENNA, RONALD P
Address: 4364 NW 103RD TERRACE
City-St-Zip: SUNRISE, FL 33351**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PRES (X) Change () Addition
Name: HACKETT, PATRICIA
Address: 8749 NW 9TH PLACE
City-St-Zip: PLANTATION, FL 33324**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** SECT (X) Change () Addition
Name: GOTZ, MARK H
Address: 154 NW MAGNOLIA LAKES BLVD
City-St-Zip: PORT ST. LUCIE, FL 34986

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: RONALD P RENNA

RA

02/27/2006

Electronic Signature of Signing Officer or Director

Date