2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007 8:00 am
Secretary of State
01-29-2007 90067 034 ****61.25

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1. Entity Name
CHRISTOPHER COLUMBUS HIGH SCHOOL, INC.

Principal Place of Business	Mailing Address
3000 SW 87TH AVE MIAMI, FL 33165	3000 SW 87TH AVE MIAMI, FL 33165

01222007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-0855391 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HANDIBODE, KEVIN 3000 SW 87TH AVE MIAMI, FL 33165	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KLEIN, JOHN 1241 KENNEDY BLVD BAYONNE, NJ 07002	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT HANDIBODE, KEVIN 3000 SW 87 AVENUE MIAMI, FL 33165	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAMMER, HANK 1241 KENNEDY BLVD BAYONNE, NJ 07002	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY/TREASURER PEARCE, DWIGHT 3000 SW 87 AVE MIAMI, FL 33165	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BISSON, DONALD PO BOX 242 ESOPUS, NY 12429	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCDONNELL, JOHN 153 AVENUE C BAYONNE, NJ 07002	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLARK, ROBERT 3399 NORTH ROAD POUGHKEEPSIE, NY 12601	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCNAMARA, PATRICK 3000 SW 87TH AVE MIAMI, FL 33165	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE-PRESIDENT MCNAMARA, PATRICK 3000, SW 87 Avenue MIAMI, FL 33165	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Dwight Pearce Dwight PEARCE 1-25-07 305-233-5650
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #