2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005474

Name:

Address:

City-St-Zip:

MCMULLEN, CARLA M

BARTOW, FL 33831

1915 SOUTH FLORAL AVENUE

FILED Apr 30, 2009 Secretary of State

Entity Name: THE FLORIDA ASSOCIATION OF CHARTER SCHOOL AUTHORIZERS, INC.

Current Principal Place of Business: New Principal Place of Business: 1915 SOUTH FLORAL AVENUE BARTOW, FL 33831 **Current Mailing Address: New Mailing Address:** POB 2552 P.O. BOX 21102 BARTOW, FL 33831 WEST PALM BEACH, FL 33416 FEI Number: 13-4360548 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRIDGES, CHARLES W II MERCED, JEANNETTE M 3300 FOREST HILL BLVD IBIS BLDG E 1915 SOUTH FLORAL AVENUE BARTOW, FL 33831 WEST PALM BEACH, FL 33406 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: JEANNETTE M MERCED 04/30/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete FINCH, CAROLYN M Name: Name: 1915 SOUTH FLORAL AVENUE Address: Address: BARTOW, FL 33831 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition FINCH, PEGGY Name: Name: Address: 215 S.E. 6TH STREET Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: Title: () Delete Title: (X) Change () Addition MERCED, JEANNETTE Name: MERCED, JEANNETTE Name: 3300 FOREST HILL BOULEVARD, SUITE A-336 3300 FOREST HILL BOULEVARD, IBIS BLDG E Address: Address: City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: WEST PALM BEACH, FL 33406 Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JEANNETTE M MERCED T 04/30/2009