2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003587

FILED May 15, 2009 Secretary of State

Entity Name: THE GEORGIA CHARTER FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3455 PEACHTREE ROAD, NE, SUITE 800 ATLANTA, GA 30326 **Current Mailing Address: New Mailing Address:** 3455 PEACHTREE ROAD, NE, SUITE 800 ATLANTA, GA 30326 FEI Number: 26-2396901 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: POZZUOLI, EDWARD J ESQ. C/O TRIPP SCOTT, P.A. 110 SE 6TH STREÉT, 15TH FLOOR FT LAUDERDALE, FL 33301 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MCINTYRE, JOHN Name: Name: 3455 PEACHTREE ROAD, NE, SUITE 800 Address: Address: City-St-Zip: ATLANTA, GA 30326 City-St-Zip: Title: () Delete Title: () Change () Addition Name: TAYLOR, ERNEST A Name: Address: 46 JACKSON STREET Address: City-St-Zip: NEWNAN, GA 30263 City-St-Zip: Title: () Delete Title: () Change () Addition BLACK, FREDERICK Name: Name: 97 MOBILE AVENUE Address: Address: City-St-Zip: ATLANTA, GA 30305 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PARKER, MARIAN ESQ Name: 3876 LEPRECHAUN CT Address: Address: City-St-Zip: DECATUR, GA 30034 City-St-Zip: Title: () Delete Title: (X) Change () Addition GRAND, DEBORA DR. GRANT, DEBORA DR. Name: Name: 3980 STEAM MILL ROAD 3980 STEAM MILL ROAD Address: Address: City-St-Zip: COLUMBUS, GA 31907 City-St-Zip: COLUMBUS, GA 31907

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: LORRIE DAVIDSON **VP** 05/15/2009