

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000006540

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** BROWARD COUNTY CHARTER SCHOOL, INC.

**Current Principal Place of Business:**

5481 NORTH STATE ROAD SEVEN.  
TAMARAC, FL 33319

**New Principal Place of Business:**

**Current Mailing Address:**

5481 NORTH STATE ROAD SEVEN.  
TAMARAC, FL 33319

**New Mailing Address:**

**FEI Number:** 26-4617253

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOUDEN, G. HORATIO  
5035 SABRELINE TERRACE  
GREENACRES, FL 33463 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: P/D  
Name: VAUGHN, JANET  
Address: 2916 WESTBROOKE DRIVE  
City-St-Zip: CINCINNATI, OH 45238 US

Title: VP/D  
Name: LYNCH, LINDA  
Address: 6354 WEST SAMPLE ROAD  
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: S/D  
Name: ARCHIBALD, VERONICA  
Address: 4971 NW 53RD AVE  
City-St-Zip: COCONUT CREEK, FL 33073 US

Title: T/D  
Name: LOUDEN, WINSOME  
Address: 5035 SABRELINE TERR.  
City-St-Zip: GREENACRES, FL 33463 US

Title: D  
Name: LOUDEN, GIFFORD  
Address: 5035 SABRELINE TERRACE  
City-St-Zip: GREENACRES, FL 33463 US

I hereby 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 all other like empowered.

**SIGNATURE:** GIFFORD LOUDEN

D

04/29/2011

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

\_\_\_\_\_  
Date