2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000488

FILED Jul 02, 2009 Secretary of State

Entity Name: CHARLOTTE COUNTRY DAY SCHOOL, INC.

Current Principal Place of Business: New Principal Place of Business: 365 ORLANDO BLVD PORT CHARLOTTE, FL 33954 LIS **Current Mailing Address: New Mailing Address:** 365 ORLANDO BLVD PORT CHARLOTTE, FL 33954 US FEI Number: 65-0661754 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: WAKSLER, GERIL 1625 WEST MARION AVE. SUITE 2 PUNTA GORDA, FL 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: (X) Change () Addition () Delete QUINN, JAMES P EMERY, HAMILTON Name: Name: 2608 RIO PLANO DR Address: 2177 HYATT DRIVE Address: City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PORT CHARLOTTE, FL 33948 Title: Title: (X) Change () Addition () Delete MARIASHI, BRIAN Name: PLANER, RICHARD Name: Address: 359 GRILL ST Address: 3860 SAN LORENZO DRIVE City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33950 Title: () Delete Title: () Change () Addition SEVERN, PATRICIA Name: Name: 1301 PINE NEEDLE ROAD Address: Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: EMERY, HAMILTON Name: LOGAN, DAVID 2373 AMNESTY DRIVE Address: 2177 HYATT DR Address: City-St-Zip: PORT CHARLOTTE, FL 33948 City-St-Zip: NORTH PORT, FL 34288 Title: () Delete Title: (X) Change () Addition BOYER, DEBORAH QUINN, JAMES P Name: Name: 26367 FEATHERSOUND DR 2608 RIO PLANO DRIVE Address: Address: City-St-Zip: PUNTA GORDA, FL 33955 City-St-Zip: PUNTA GORDA, FL 33950 Title: () Delete Title: () Change () Addition GEROFSKY, CHRISTINE Name: Name: Address: 1234 RICHTER ST Address: PORT CHARLOTTE, FL 33952 City-St-Zip: City-St-Zip:

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: CHRISTINE GEROFSKY HEAD 07/02/2009