2008 NOT-FOR-PROFIT CORPORATION

Secretary of State ANNUAL REPORT 02-04-2008 90031 044 ****61.25 DOCUMENT # N99000006816 SEBASTIAN CHARTER JUNIOR HIGH, INC. 40016430 Principal Place of Business Mailing Address **782 WAVE STREET 782 WAVE STREET** SEBASTIAN, FL 32958 SEBASTIAN, FL 32958 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092008 Chg-NP CR2E037 (12/06) Applied For City & State City & State 4. FEI Number 59-3613013 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TAYLOR, ANITA **782 WAVE STREET** Street Address (P.O. Box Number is Not Acceptable) SEBASTIAN, FL 32958 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2008 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD ☐ Delete TITLE DIKECTOR ☐ Change Addition TITLE Jacquelyn Acara 525 Wirrbrow Dr. MOSKOWITZ, KEN NAME 103 TRACY DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-71P SEBASTIAN, FL 32958 CITY+ST-7IP Jebastian, FL 32958 Delete DIRECTOR Addition TITLE TITLE ☐ Change Dennis White INGUI, WILLIAM NAME 402 Orange Auc 626 LAYPORT DR STREET ADDRESS STREET ADDRESS SEBASTIAN, FL 32958 CITY-ST-ZIP 32958 CITY-ST-ZIP Sebastian. M Delete ☐ Change ☐ Addition TITLE SHMIDT, BARBARA NAME NAME 436 N TANGERINE SQ SW STREET ADDRESS STREET ADORESS CITY-ST-ZIP VERO BEACH, FL 32968 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE TAYLOR, CHRISTOPHER NAME NAME 405 10TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32962 CITY - ST - ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE

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 toustee 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.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

RIVERA, JOHN

VERO BEACH, FL 32966

8025 24TH ST

GIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

☐ Addition

☐ Change

FILED Feb 04, 2008 8:00 am