# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 18, 2006**
**Secretary of State**

DOCUMENT# 749551

**Entity Name:** SOUTHEAST ACCREDITING ASSOCIATION OF CHRISTIAN SCHOOLS, COLLEGES, AND SEMINARIES, INC.

**Current Principal Place of Business:**

6423 HAMILTON BRIDGE RD.
MILTON, FL 32570

**New Principal Place of Business:**

**Current Mailing Address:**

6423 HAMILTON BRIDGE RD.
MILTON, FL 32570

**New Mailing Address:**

**FEI Number: 59-6554316** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

KELLEY, RANDAL H
6826 MERTIS WAY
MILTON, FL 32583 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 | ( ) Delete |
| Name: | MARS, DEWEY W | |
| Address: | 6423 HAMILTON BRIDGE ROAD | |
| City-St-Zip: | MILTON, FL 32570 | |
| Title: | VP | ( ) Delete |
| Name: | KELLEY, RANDAL H | |
| Address: | 6826 MERTIS WAY | |
| City-St-Zip: | MILTON, FL 32583 | |
| Title: | S | ( ) Delete |
| Name: | STAUFFER, SEAN P | |
| Address: | 4032 ERMINE | |
| City-St-Zip: | MILTON, FL 32583 | |
| Title: | T | (X) Delete |
| Name: | JOHNSON, JIMMY L | |
| Address: | 4380 PONDEROSA ROAD | |
| City-St-Zip: | MILTON, FL 32583 | |
| Title: | D | ( ) Delete |
| Name: | JONES, JAMES H | |
| Address: | 5134 PARKWAY DR | |
| City-St-Zip: | MILTON, FL 32570 | |
| Title: | D | ( ) Delete |
| Name: | LUNSFORD, ROBERT L | |
| Address: | 5466 RUSSELL DRIVE | |
| City-St-Zip: | MILTON, FL 32570 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | | |
|---|---|---|
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | S/T | (X) Change ( ) Addition |
| Name: | STAUFFER, SEAN P | |
| Address: | 4032 ERMINE | |
| City-St-Zip: | MILTON, FL 32583 | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |
| Title: | | ( ) Change ( ) Addition |
| Name: | | |
| Address: | | |
| City-St-Zip: | | |

I hereby certify that the information supplied with this filing does not qualify for the 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: RANDAL H KELLEY VP 04/18/2006

Electronic Signature of Signing Officer or Director — Date