2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006
Secretary of State

DOCUMENT# N04000003433

Entity Name: SUMTER CHRISTIAN SCHOOL, INC.

Current Principal Place of Business:

2210 CR 528
SUMTERVILLE, FL

New Principal Place of Business:

Current Mailing Address:

483 E C-48
BUSHNELL, FL 33513

New Mailing Address:

FEI Number: 51-0505260 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LORD, KAREN
483 EAST C-48
BUSHNELL, FL 33513 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: PT ( ) Delete
Name: LORD, KAREN
Address: 483 E. C-48
City-St-Zip: BUSHNELL, FL 33513

Title: VS ( ) Delete
Name: KENDRICK, CAROLYN
Address: 14219 CR 757
City-St-Zip: WEBSTER, FL 33597

Title: D ( ) Delete
Name: HUDDLESTON, DARLA
Address: 369 E-476
City-St-Zip: BUSHNELL, FL 33513

Title: D ( ) Delete
Name: CASON, DAVID
Address: 2857 COUNTY ROAD 722
City-St-Zip: WEBSTER, FL 33597

Title: D ( ) Delete
Name: WHITE, JOYCE
Address: 2314 COUNTY ROAD 564
City-St-Zip: BUSHNELL, FL 33513

Title: D ( ) Delete
Name: WHITE, RUSSELL
Address: 2314 COUNTY ROAD 564
City-St-Zip: BUSHNELL, FL 33513

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: LORD, KAREN
Address: 483 E. C-48
City-St-Zip: BUSHNELL, FL 33513

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: PT (X) Change ( ) Addition
Name: WHITE, JOYCE
Address: 2314 COUNTY ROAD 564
City-St-Zip: BUSHNELL, FL 33513

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: KAREN LORD VP 04/28/2006

Electronic Signature of Signing Officer or Director — Date