## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N10000007040

FILED Apr 12, 2011 Secretary of State

Entity Name: WILLISTON CENTRAL CHRISTIAN ACADEMY, INC.

Current Principal Place of Business: New Principal Place of Business:

225 SE 4TH ST WILLISTON, FL 32696

Current Mailing Address: New Mailing Address:

225 SE 4TH ST WILLISTON, FL 32696

FEI Number: 61-1620967 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WELBORN, JUDTIH
225 SE 4TH ST

WILLISTON, FL 32696 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:**

Title: PD

Name: WELBORN, JUDITH
Address: 306 NE 10TH PLACE
City-St-Zip: WILLISTON, FL 32696

Title: VP

Name: WINNINGHAM, MICHELE Address: 225 SE 4TH ST

City-St-Zip: WILLISTON, FL 32696

Title: S

 Name:
 SMITH, BOBBIE

 Address:
 225 SE 4TH ST

 City-St-Zip:
 WILLISTON, FL 32696

Title: [

 Name:
 BROOKS, ERIK

 Address:
 18750 SE 2ND ST

 City-St-Zip:
 WILLISTON, FL 32696

Title: [

Name: WELBORN, JASON
Address: 602 NE 10TH BLVD
City-St-Zip: WILLISTON, FL 32696

Title: [

 Name:
 SMITH, JOSEPH E

 Address:
 3750 NE 180TH AVE

 City-St-Zip:
 WILLISTON, FL 32696

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: JUDITH WELBORN PD 04/12/2011