2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2008
Secretary of State

DOCUMENT# N21330

Entity Name: FIRESIDE CHRISTIAN ACADEMY, INC.

Current Principal Place of Business:

8100 68TH STREET NORTH
PINELLAS PARK, FL 33781 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1607
PINELLAS PARK, FL 33780 US

New Mailing Address:

FEI Number: 59-2887884 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIND, PATRICIA S
8100 68TH STREET NORTH
PINELLAS PARK, FL 33781 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:	DP	( ) Delete
Name:	LIND, PATRICIA S	
Address:	8100 68TH STREET NORTH	
City-St-Zip:	PINELLAS PARK, FL 33781 US	
Title:	VP	( ) Delete
Name:	CORON, EDGAR,	
Address:	29250 US 19 NORTH #453	
City-St-Zip:	CLEARWATER, FL 33761 US	
Title:	O	( ) Delete
Name:	GEUL, JUDY	
Address:	2102 74 STREET NORTH	
City-St-Zip:	SAINT PETERSBURG, FL 33710 US	
Title:	T	( ) Delete
Name:	LABORN, WALLY,	
Address:	51 PINDO PALM EAST	
City-St-Zip:	LARGO, FL 33770 US	
Title:	CS	( ) Delete
Name:	DEWEESE, NILA,	
Address:	7292 62 AVENUE NORTH	
City-St-Zip:	PINELLAS PARK, FL 33781 US	
Title:	D	(X) Delete
Name:	SMITH, DOROTHE,	
Address:	8100 68TH STREET NORTH	
City-St-Zip:	PINELLAS PARK, FL 33781 US	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:	( ) 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 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: NILA DEWEESE CS 01/15/2008

Electronic Signature of Signing Officer or Director — Date