FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9500000742 (5)

MANTHANO CHRISTIAN ACADEMY, INC.

FILED Apr 23 1997 8:00am Secretary of State



Principal Place of Business Mailing Address							! 46 161 #8 414	18111 10011 Of		
2110 OLD DAYTO DAYTONA BEACI		P.O. BOX 290610 PORT ORANGE FL 32129-0610 US								
-		US	00			3. Date Incorporated or Qualified 02/13/1995	3a. Date of Last Report 05/01/1996			
2. Principal P	lace of Business	2s. Mailing Address			4. FEI Number . Applie			pplied For	_	
21		26			59-3304514					
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State	28			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zíp	Country	├── ┐ `		untry		8. This corporation has liability for intangible tax under s. 199.032,				
24	[25]	29				Florida Statutes Yes X No				4
	9. Name and Address of Curre	nt Hegistered Agent		81	Name	10. Name and Address of New Heg	JISTOPO A	gent		\dashv
1445054	DISSA S				TVallie					
WARREN,				82	Street Addr	eet Address (P.O. Box Number is Not Acceptable)			7	
	DAYTONA ROAD			83						-
DATIONA	BEACH FL 32124									╛
				84	City		FL	85 Zip	Code	
l office or r	to the provisions of Sections 617.050 egistered agent, or both, in the State m familiar with, and accept the oblice.	e of Florida. Such change was	s authorize	d by t	named corp the corporat	oration submits this statement for the prion's board of directors. I hereby accep	urpose of	changing introduction	its registered s registered	1
	in rammar with and accept the oblig	gations of, occiton of 1.0000, i	i iorida olai	iulos.						
SIGNATURE .	Signature, typed or printed name of registered ag	ent and title if applicable (N	OTE Registere	d Agen	t signature requir	ed when reinstating)	DATE			. [
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC				<u>]</u>
TITLE	D	☐ DELETE	DELETE 1.1 TIT				i	Change	Addition	į
NAME	WARREN, RUTH E		1.2 N/							2
STREET ADDRESS	2110 OLD DAYTONA ROAD				DDRESS					ļŭ
CITY-ST-ZIP TITLE	DAYTONA BEACH FL 32124	DELETE	1.4 CI 2.1 TI	ITY-ST	- ZIP			Change	☐ Addition	٦è
NAME	D Warren, Scott C		2.2 NA		ł			Change	LJ AUGINON	
STREET ADDRESS	2110 OLD DAYTONA ROAD				.DDRESS		²			
CITY-ST-ZIP	DAYTONA BEACH FL 32124		1	CITY-ST	1					1
TITLE	D	DELETE	3.1 11					Change	Addition	,
NAME	WARREN, CHARLES E	•	3.2 NJ				•	•		
STREET ADDRESS	A SAME A GALLERY BOLLOW TALKS COME		3.3 \$	3.3 STREET ADDRESS						
CITY-ST-ZIP	PORT ORANGE FL 32119		3.4 0	CITY-ST	- ZIP					
TITLE	☐ DELETE 4.11		ITLE		Change			Addition		
NAME			4.2 N	IAME	ŀ					
STREET ADDRESS			4.3 ST	TREET A	.DDRESS					
CITY-ST-ZIP			4.4 C	ITY-ST	- ZIP					
TITLE		DELETE	5.1 (1				[Change	Addition	
NAME			5.2 N							
STREET ADDRESS					DDRESS					
CITY-ST-ZIP		DELETE		ITY-SI	- ZIP			Chana	Addition	\perp
TITLE		☐ OELETE	6.1 TI				ı	Change	L. ADDITION	
NAME DESCRIPTION			6.2 N		ppproc					
STREET ADDRESS			- 4		DDRESS					
City-St-ZiP 14. I do herei	by certify that the information supplie	ed with this filing does not gue		ITY-ST		In Section 119.07(3)(i), Florida Statutes	. I further	certify that	t the	+
1-6					'	and the second of the second o				. 1

Information indicated on this annual report or supplomental annual 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 in changed, or on an attachment with an address.