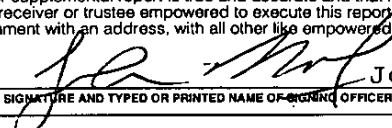


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90079 050 ****61.25

DOCUMENT # N95000001974					
1. Entity Name COMMUNITY CHRISTIAN SCHOOL OF TALLAHASSEE, INC.					
Principal Place of Business 4859 KERRY FOREST PKWY TALLAHASSEE, FL 32309 US			Mailing Address 4859 KERRY FOREST PKWY TALLAHASSEE, FL 32309 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3312971	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ARGERSINGER, THOMAS K 4859 KERRY FOREST PKWY TALLAHASSEE, FL 32308			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE SD	NAME DAVIDSON, SHARYN ☐ Delete		TITLE	NAME ☐ Change ☐ Addition	
STREET ADDRESS 4859 KERRY FOREST PKWY	CITY-ST-ZIP TALLAHASSEE, FL 32309		STREET ADDRESS	CITY-ST-ZIP	
TITLE TD	NAME SCARINGE, MIKE ☒ Delete		TITLE TD	NAME Gale, Richard ☐ Change ☒ Addition	
STREET ADDRESS 4859 KERRY FOREST PKWY	CITY-ST-ZIP TALLAHASSEE, FL 32309		STREET ADDRESS 4859 Kerry Forest Pkwy.	CITY-ST-ZIP Tallahassee, FL 32309	
TITLE PD	NAME MOTTICE, JOHN ☒ Delete		TITLE PD	NAME Nowlin, John ☐ Change ☒ Addition	
STREET ADDRESS 4859 KERRY FOREST PKWY	CITY-ST-ZIP TALLAHASSEE, FL 32309		STREET ADDRESS 4859 Kerry Forest Pkwy	CITY-ST-ZIP Tallahassee, FL 32309	
TITLE	NAME ☐ Delete		TITLE	NAME ☐ Change ☐ Addition	
STREET ADDRESS	CITY-ST-ZIP		STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME ☐ Delete		TITLE	NAME ☐ Change ☐ Addition	
STREET ADDRESS	CITY-ST-ZIP		STREET ADDRESS	CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  John Nowlin 4-7-5 (850) 893-6628					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

50035134



04052005 Chg-NP CR2E037 (10/03)

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

Filing Fee is \$61.25 Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

Make check payable to Florida Department of State

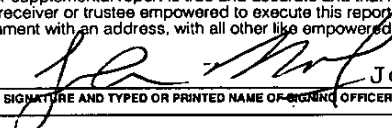
10. OFFICERS AND DIRECTORS

TITLE	SD	☐ Delete
NAME	DAVIDSON, SHARYN	
STREET ADDRESS	4859 KERRY FOREST PKWY	
CITY-ST-ZIP	TALLAHASSEE, FL 32309	
TITLE	TD	☒ Delete
NAME	SCARINGE, MIKE	
STREET ADDRESS	4859 KERRY FOREST PKWY	
CITY-ST-ZIP	TALLAHASSEE, FL 32309	
TITLE	PD	☒ Delete
NAME	MOTTICE, JOHN	
STREET ADDRESS	4859 KERRY FOREST PKWY	
CITY-ST-ZIP	TALLAHASSEE, FL 32309	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	TD	☐ Change ☐ Addition
NAME	Gale, Richard	
STREET ADDRESS	4859 Kerry Forest Pkwy.	
CITY-ST-ZIP	Tallahassee, FL 32309	
TITLE	PD	☐ Change ☒ Addition
NAME	Nowlin, John	
STREET ADDRESS	4859 Kerry Forest Pkwy	
CITY-ST-ZIP	Tallahassee, FL 32309	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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SIGNATURE:  John Nowlin 4-7-5 (850) 893-6628

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #