## CORPORATION ANNUAL REPORT

FILED Feb 04, 2009 Secretary of State

## DOCUMENT# P09000047314

Entity Name: CHRISTIAN HOME ACADEMY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 16 COLLEGE DRIVE ORANGE PARK, FL 32065 US **Current Mailing Address: New Mailing Address:** 1965 CEDAR RIVER COURT ORANGE PARK, FL 320037939 FEI Number: 59-3732261 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPERRY, JUDY O M.ED. 1965 CEDAR RIVER COURT ORANGE PARK, FL 320037939 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SPERRY, MARK L REV. Name: Name: 1965 CEDAR RIVER COURT Address: Address: City-St-Zip: ORANGE PARK, FL 320037939 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: SPERRY, JUDY O M.ED. Name: Address: 1965 CEDAR RIVER COURT Address: City-St-Zip: ORANGE PARK, FL 320037939 City-St-Zip: Title: () Delete Title: () Change () Addition TRENT, DAVID B.A. Name: Name: 3859 RANDALL ROAD Address: Address: City-St-Zip: GREEN COVE SPRINGS, FL 32043 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: ROMEIN, DAN Name: Address: 341 MICKLERS ROAD Address: City-St-Zip: ST. AUGUSTINE, FL 32280 City-St-Zip: Title: () Delete Title: () Change () Addition GREEN, BRUCE DR. Name: Name: 15235 FOREST OAK STREET Address: Address: City-St-Zip: PRAIRIEVILLE, LA 70769 City-St-Zip: Title: () Delete Title: () Change () Addition MARSHALL, DOUGLAS Name: Name: Address: 3859 RANDALL ROAD Address: GREEN COVE SPRINGS, FL 32043 City-St-Zip: 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: MARK L. SPERRY P 02/04/2009