2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736205

FILED Jan 23, 2007 Secretary of State

Entity Name: WESTWOOD CHRISTIAN SCHOOL, INC.

Current Principal Place of Business: New Principal Place of Business: 920 11TH ST. S.W. LIVE OAK, FL 32064 **Current Mailing Address: New Mailing Address:** 920 11TH ST. S.W. LIVE OAK, FL 32064 FEI Number: 59-1698760 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: BILLUPS, RANDY CHAIRMA FERREIRA, PATTI CHAIRMA 910 ICHÉTUCKNEE ROAD 11219 HOGAN ROAD LIVE OAK, FL 32060 LIVE OAK, FL 32060 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: PATTI FERREIRA 01/23/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DEAS, JIMMY MR. Name: Name: 920 SW 11TH STREET Address: Address: City-St-Zip: LIVE OAK, FL 32064 City-St-Zip: Title: () Delete Title: (X) Change () Addition BILLUPS, RANDY MR. Name: BURLEY, JOHN MR. Name: Address: 910 ICHETUCKNEE ROAD Address: 9446 141ST LANE City-St-Zip: LIVE OAK, FL 32060 City-St-Zip: LIVE OAK, FL 32060 Title: () Delete Title: (X) Change () Addition CURL, RAMONA MRS GILL, ALLISON MRS Name: Name: 17182 168TH STREET 405 PINE AVENUE Address: Address: City-St-Zip: MCALPIN, FL 32062 City-St-Zip: LIVE OAK, FL 32064 Title: SEC () Delete Title: () Change () Addition Name: FRIER, KERRI MRS. Name: Address: 7264 65TH DRIVE Address: City-St-Zip: LIVE OAK, FL 32060 City-St-Zip: Title: () Delete Title: () Change () Addition PENNINGTON, PAULA Name: Name: 7087 CTY ROAD 249 Address: Address: City-St-Zip: LIVE OAK, FL 32060 City-St-Zip: Title: () Delete Title: (X) Change () Addition FERREIRA, PATTY MRS SWEAT, CHARLES MR Name: Name: Address: 11219 HOGAN ROAD Address: 13373 CR 136 LIVE OAK, FL 32060 LIVE OAK, FL 32060 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PATTI FERREIRA CH 01/23/2007