

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004154

FILED
Mar 07, 2007
Secretary of State

Entity Name: FAITH CHRISTIAN SCHOOL OF SEMINOLE, INC.

Current Principal Place of Business:

2462 SOUTH PARK AVE.
SANFORD, FL 32771

New Principal Place of Business:

2200 PEMBROOK DRIVE
ORLANDO, FL 32810

Current Mailing Address:

2462 SOUTH PARK AVE.
SANFORD, FL 32771

New Mailing Address:

2200 PEMBROOK DRIVE
ORLANDO, FL 32810

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GABLE, GORDON
2075 HUNTERFIELD RD.
MAITLAND, FL 32751 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: PD () Delete
Name: GABLE, GORDON
Address: 2075 HUNTERFIELD RD.
City-St-Zip: MAITLAND, FL 32751

Title: VPD () Delete
Name: COXON, KATHY
Address: 4170 MOORES STATION ROAD
City-St-Zip: SANFORD, FL 32773

Title: D () Delete
Name: COXON, STEVE
Address: 4170 MOORES STATION ROAD
City-St-Zip: SANFORD, FL 32773

Title: D () Delete
Name: GABLE, LINDA
Address: 2075 HUNTERFIELD RD.
City-St-Zip: MAITLAND, FL 32751

Title: D (X) Delete
Name: CARP, STEVEN
Address: 5010 DAHOON VIEW DR
City-St-Zip: ORLANDO, FL 32829

Title: D (X) Delete
Name: CARP, PAMELA
Address: 5010 DAHOON VIEW DR
City-St-Zip: ORLANDO, FL 32829

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: CARP, PAMELA
Address: 5010 DAHOON VIEW DR
City-St-Zip: ORLANDO, FL 32829

Title: D (X) Change () Addition
Name: CARP, STEVEN
Address: 5010 DAHOON VIEW DR
City-St-Zip: ORLANDO, FL 32829

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 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: PAMELA CARP

VPD

03/07/2007

Electronic Signature of Signing Officer or Director

Date