2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#711339

FILED Apr 18, 2006 Secretary of State

Entity Name: GUARDIAN LUTHERAN CHURCH AND SCHOOL OF MANDARIN, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

4911 LOSCO ROAD

JACKSONVILLE, FL 322571503

Current Mailing Address: New Mailing Address:

4911 LOSCO ROAD

JACKSONVILLE, FL 322571503

FEI Number: 59-1153478 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:

VONDRASEK, GARY

12142 BLACKFOOR COURT

KORMAN, ROBERT

1530 STONE BRIAR RD.

JACKSONVILLE, FL 32223 US GREEN COVE SPRINGS, FL 32043 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: ROBERT KORMAN 04/18/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

Name: VONDRASEK, GARY Name: KORMAN, ROBERT
Address: 12142 BLACKFOOT COURT Address: 1530 STONE BRIAR RD.

City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: TD () Delete Title: TD (X) Change () Addition Name: SCHILDBERG, SCOTT Name: KOLESAR, RUDOLF

Address: 1869 ROUAL FERN LANE
City-St-Zip: ORANGE PARK, FL 32003
Address: 11156 RUSTIC PINES CIRCLE
City-St-Zip: JACKSONVILLE, FL 32257

Title: D () Delete Title: D (X) Change () Addition

 Name:
 RINGHOFER, CHRISTINE
 Name:
 BRANNEN, DAVE

 Address:
 12635 STEEPLECHASE LANE
 Address:
 9930 WATSON DRIVE W.

 City-St-Zip:
 JACKSONVILLE, FL 32223
 City-St-Zip:
 JACKSONVILLE, FL 32257

Title: SD () Delete Title: SD (X) Change () Addition

 Name:
 LEMING, DEBBIE
 Name:
 CIRILLO, ANN

 Address:
 2947 OAKSIDE ROAD, N.
 Address:
 2555 BLUFFTON DR.

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 JACKSONVILLE, FL 32224

Title: () Delete Title: VD () Change (X) Addition

Name: Name: HIKE, DAVID

 Address:
 Address:
 12078 CRANEFOOT DR.

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32223

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: ROBERT KORMAN PD 04/18/2006