

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 22, 2000 8:00 am
Secretary of State
 02-22-2000 90022 048 ****70.00

DOCUMENT # 721512

1. Entity Name

CHRISTIAN ACADEMY OF BOYNTON BEACH, INC.

Principal Place of Business

Mailing Address

101 W BOYNTON BEACH BLVD
 BOYNTON BEACH FL 33435
 US

101 W BOYNTON BEACH BLVD
 BOYNTON BEACH FL 33435-4020
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1354876

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORN BRENDA
919 MISSION HILL RD
BOYNTON BEACH FL 33435

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.

SIGNATURE

Brenda G. Corn

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD
 NAME: CORNN BRENDA Delete
 STREET ADDRESS: 919 MISSION HILL RD
 CITY-ST-ZIP: BOYNTON BEACH FL

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: VPD
 NAME: GUNSFORD, FRANK Delete
 STREET ADDRESS: 30 SIOUX LANE
 CITY-ST-ZIP: LANTANA FL 33462

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: S Delete
 NAME: MEADOWS, STEPHANIE
 STREET ADDRESS: 207 SW 13TH AVE
 CITY-ST-ZIP: BOYNTON BCH FL

TITLE: Change Addition
 NAME: *Squire, Patricia*
 STREET ADDRESS: *1301 N.W. 8 street*
 CITY-ST-ZIP: *BOYNTON BEACH, FL 33435*

TITLE: TD
 NAME: O'HALLDRAN, JENNY Delete
 STREET ADDRESS: 3665 SILVER LACE LANE #77
 CITY-ST-ZIP: BOYNTON BEACH FL 33436

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:

TITLE: Change Addition
 NAME:
 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:

Brenda G. Corn BRENDA G. CORNN - DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-15-2000 561-737-4423