2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT #724125 HAVERHILL BAPTIST DAY SCHOOL, INC. 08 OCT 27 PH 12: 39 Principal Place of Business Mailing Address LAHASSEE, FLORIDA 671 NORTH HAVERHILL ROAD 671 NORTH HAVERHILL ROAD WEST PALM BEACH, FL 33415 WEST PALM BEACH, FL 33415 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 10172008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number 59-1709332 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Christopher J. Hudson BARKER, ANN Street Address (P.O. Box Number is Not Acceptable) 817 SAPEN RD WEST PALM BEACH, FL 33409 671 N. Haverhill Rd. Zip Code 33411 WPB 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Addition Ann Barker NAME BARKER, ANN NAME BIT Aspen PL 817 ASPEN RD STREET ADDRESS STREET ADDRESS WEST PALM BEACH, FL 33407 WPB , FL 33415 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition Sandra D'Agestine ATWELL, DIANA NAME NAME 83 Eden Lawn Terr. STREET ADDRESS 5775 FERNLEY DRIVE W., #139 STREET ADDRESS CITY-ST-ZIP W. PALM BEACH, FL 33415 CITY-ST-7E WPB , FL 33415 TITLE ☐ Delete TITLE Addition . ☐ Change Gay O'Neal SEARFOSS, GLORIA NAME NAME 524 E. Rambling Dr. 726 CAROLINE AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH, FL 33413 CITY-ST-ZIP wellington, FL 33414 Delete TITLE TITLE ☐ Change **₩**Addition Keith Carr SULLIVAN, DAVID NAME NAME STREET ADDRESS 1266 SLASH PINE CIR STREET ADDRESS 5118 Marion Pl CITY-ST-7IP WEST PALM BEACH, FL 33409 CITY-ST-ZIP WPB , FL 33407 TITLE ☐ Delete TITLE Addition Christopher J. Hudson MOORE, MICHAEL R NAME NAME 671 N. Havehill RA. STREET ADDRESS 1100 CAMEO CIR STREET ADDRESS CITY-ST-ZIF WEST PALM BEACH, FL 33417 CITY-ST-ZIP WPB, FL 33415 TITLE ☐ Delete TITLE ☐ Change ☐ Addition Billy Schmitt NAME NAME 4934 Wisgins Rd. STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP Lake Wo-12, R 33463

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

7

683-2327

10/28