

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726377

FILED
May 05, 2009
Secretary of State

Entity Name: FLORIDA CHRISTIAN COLLEGE, INC.

Current Principal Place of Business:

1011 BILL BECK BLVD.
KISSIMMEE, FL 34744 US

New Principal Place of Business:

Current Mailing Address:

1011 BILL BECK BLVD.
KISSIMMEE, FL 34744 US

New Mailing Address:

FEI Number: 51-0173775 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BEHRMAN, WILLIAM K
1011 BILL BECK BLVD
KISSIMMEE, FL 34744 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: CFO () Delete
Name: BEHRMAN, WILLIAM K
Address: 1800 EVERGREEN CT.
City-St-Zip: KISSIMMEE, FL 34746 US

Title: T () Delete
Name: BURNAM, LAVON
Address: 1235 LEMONWOOD ROAD
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: TR () Delete
Name: ROBINSON, JAMES
Address: 5062 CARSON STREET
City-St-Zip: SAINT CLOUD, FL 34771 US

Title: P () Delete
Name: ARMSTRONG, HAROLD
Address: 5207 HAMMOCK POINTE COURT
City-St-Zip: SAINT CLOUD, FL 34771 US

Title: TR () Delete
Name: BOOK, JAMES
Address: 4826 STAHL COURT
City-St-Zip: ORLANDO, FL 32817 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: WILLIAM K. BEHRMAN

CFO

05/05/2009

Electronic Signature of Signing Officer or Director

_____ Date