## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 726377



**FILED** Jan 10, 2003 8:00 am Secretary of State

1. Entity Na	A CHRISTIAN COLLEGE, INC.						01-10-2003 90	0073 018 **	**70.00	
1011 BILL BECK BLVD. 1011			Mailing Address O11 BILL BECK BLVD. SSIMMEE FL 34744 S							
2. Principal	Place of Business	3. Mailing A	ddress	****						
Suite, Apt. #, etc.		Suite, Ap	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State				4. FEI Number 51-0173775			Applied For	
Zip	Country	Zip		Country		5. Certificate of S	Status Desired (	\$8.75	Not Applica Additional	able
6. Name and Address of Current Registered			ent			Fee Required 7. Name and Address of New Registered Agent				
				Name				siou Agent	· · · · ·	$\dashv$
1011 BII	ly, david l Ll Beck blvd			Street A	Street Address (P.O. Box Number is Not Acceptable)					$\dashv$
KISSIMMEE FL 34744								<del></del>	<del></del>	
				City	·			Zip	Code	
A The abov	e named entity submits this statement fo	. tlo	-1							
SIGNATURE  Signature, typed or printed name of registered agent and title if appli  FILE NOW: FEE IS \$61.25			9. Election Campaign Financing			\$5.00 May Be Added to Fees		Check Paya		
10.	OFFICERS AND DIR			11.	A	DDITIONS/CHANG	ES TO OFFICERS A	ND DIRECTOR	S IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MCNEELY, DAVID L. 1536 ELMWOOD AVENUE KISSIMMEE FL	<i>;</i>		TITLE NAME STREET ADORESS CITY-ST-ZIP	Vice	- president		<b>₽</b> € Cha	nge 🗌 Addii	ioi F037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BURNAN, LAVON 1235 LEMONWOOD RD. JACKSONVILLE FL	. [		TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Char	ige 🔲 Addit	—
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUCHANAN, JAMES R 2360 OAK LEAF LANE KISSIMMEE FL 34744	Þ		TITLE NAME STREET ADDRESS CITY-ST-ZIP				Char	ge 🗌 Addit	ion
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	ST MCMILLAN, ALLEN 579 BAIEDEN RD JACKSONVILLE FL 32218			TITLE NAME STREET ADDRESS CITY-ST-ZIP				Chan	ge 🗌 Additi	on
ITLE IAME TREET ADDRESS ITY-ST-ZIP	T DURLIN, MARK 2410 FRANKLIN DR. KISSIMMEE FL 34744		!	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Chan	ge 🗌 Additi	on
ITLE AME TREET ADDRESS ITY-ST-ZIP	P Haaold Armstrong 1011 Bill Brek Blu Kissimmer F. F.L	, <sub>d</sub> )	!	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Phosi HARO 1011 Kiss	ide A - Id Aamsi Bill B immee	thong ech Blud. FL 347	□ Chan	ge Additi	on

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:

1-7-03

407 847-8966