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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

WESTWOOD CHRISTIAN SCHOOL, INC.

FILED Feb 06 1998 8:00am Secretary of State

Periodical Place of Business Walling Address 22							
LIVE OAK FL 32809-3804 LIVE O	Principal Plac	e of Business	Mailing Address		- i tabili inaba lilia stila libit galbi alik bilik	OLDIY DEBLI BIRRY WINTH BLOTL 1861	
Dive OAK FL \$2889-9894 Dive OAK FL \$2889-9894					3. Date Incorporated or Qualified	<u> </u>	
2. Principal Place of Business 2. Mailing Address 3. S. Certificate of Status Desired \$8.75 Additional 21 Self-Apt. #, etc. 22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 32 Suite, Apt. #,	LIVE OAK FL 32060-3604 LIVE OAK FL 32060-3604						
2. Principal Place of Business 2.4. Mailing Address 5. Certificate of Status Desired Fee Required Fee Required Set On May Be Added to Fees Store, Apt. 6, etc. 27 Store City & State						Applied For	
Suite, Apt. #, etc. Suite, Apt. #, etc.					59-1698760	Not Applicable	
Suite, Apt. 4, etc. Suite, Apt. 4, etc.					5. Certificate of Status Desired	\$8.75 Additional	
27 City & State City & State City & State City & State Trust Fund Contribution Added to Pees 23 Zip Country Zip Country Zip State Zip Country Replaced as Zip Zi	\ 						
City & State Country Zip Z			— · · ·				
28							
Zip			- '	· · · · · · · · · · · · · · · · · · ·			
25 29 30 Personal Property Tax due June 30. Yes No	Zip			Country			
LAND, GERTRUDE RT. 5 BOX 258, N/A LIVE OAK FL 32060 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, are both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, by an familiar with its and accept the obligations of, Section 617.0503, Fiorida Statutes. SIGNATURE SIGNATURE SIGNATURE D	24	25	29	30		☐ Yes ☐ No	
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RT. 5 BOX 258, N/A LIVE OAK FL 32060 83 84 City_ve_Oak FL 85 Zip_Code 32000 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the origination submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Signature, typed or private name of registered agent and the K applicable.				81 Name			
ATTENTIAL LIVE OAK FL 32060 84 CITY VE OAK FL 85 ZID Code Sactor 11. Pursuant to the provisions of Sections \$17,0502 and \$17,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the obligations of, Section \$17,0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 11 TITLE DELETE 11 TITLE DELETE 11 TITLE DELETE 11 TITLE DELETE 12 TITLE DELETE 13 TITLE COAK FL 32040 Addition MAKE 14 ADITY-ST-ZIP LIVE OAK FL 32040 Addition Additio	LAND, GERTRUDE 82 Street Address (P.O. Box Number is Not Acceptable)						
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing is registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the epipointment as registered agent, arm familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. Signature					665 1615 Road		
The provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. Signature	LIVE OAK FL 32060 83						
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SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE Registered Agent signature required when reinstating) DATE	office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered						
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CITY-ST-ZIP LIVE OAK FL 64 CITY-ST-ZIP					<u></u>		
14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an	14. I hereby co	ertify that the information supplied w	ith this filing does not qualify for	or the exemption state	ed in Section 119.07(3)(i), Florida Statutes. I further	certify that the information	