

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740541

**FILED**  
**Jan 24, 2012**  
**Secretary of State**

**Entity Name:** REDLAND CHRISTIAN ACADEMY, INC.

**Current Principal Place of Business:**

17700 SW 280 ST.  
HOMESTEAD, FL 33031

**New Principal Place of Business:**

**Current Mailing Address:**

17700 SW 280 ST.  
HOMESTEAD, FL 33031

**New Mailing Address:**

**FEI Number:** 59-1795662

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WALDBILLIG, THEODORE W  
17700 SW 280 STREET  
HOMESTEAD, FL 33031 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:** VD  
**Name:** PREWITT, LOWELL  
**Address:** 1691 NW 8 STREET  
**City-St-Zip:** HOMESTEAD, FL 33030

**Title:** S  
**Name:** BROUGHTON, RAY  
**Address:** 1417 SE ROAD  
**City-St-Zip:** HOMESTEAD, FL 33033

**Title:** T  
**Name:** MILBURN, BRIAN  
**Address:** 323 SW 4TH ST.  
**City-St-Zip:** FLORIDA CITY, FL 33034

**Title:** P  
**Name:** WALDBILLIG, THEODORE  
**Address:** 16940 SW 276 ST  
**City-St-Zip:** HOMESTEAD, FL 33031

**Title:** D  
**Name:** ANGRY, MARY  
**Address:** 25879 SW 132 PLACE  
**City-St-Zip:** HOMESTEAD, FL 33032

I hereby 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 all other like empowered.

**SIGNATURE:** THEODORE W WALDBILLIG

P

01/24/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date