

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758628

FILED
Apr 17, 2007
Secretary of State

Entity Name: HERNANDO CHRISTIAN PRIVATE ACADEMY, INC.

Current Principal Place of Business:

7200 EMERSON RD
BROOKSVILLE, FL 346015736

New Principal Place of Business:

7200 EMERSON RD
BROOKSVILLE, FL 346015736 US

Current Mailing Address:

7200 EMERSON RD
BROOKSVILLE, FL 346015736

New Mailing Address:

7200 EMERSON RD
BROOKSVILLE, FL 346015736 US

FEI Number: 59-2102319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILFONG, PAMELA S
21033 VIOLET ROAD
BROOKSVILLE, FL 34601 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: PD () Delete
Name: WILFONG, PAMELA S MRS.
Address: 21033 VIOLET ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: VD () Delete
Name: SULLIVAN, ROBERT MR.
Address: 8007 REDBUD LANE
City-St-Zip: BROOKSVILLE, FL 34601

Title: SD () Delete
Name: WEST, DEE MRS.
Address: 19049 POWELL RD
City-St-Zip: BROOKSVILLE, FL 34604

Title: TD () Delete
Name: BUCKLEY, RHONDA MRS.
Address: 26585 OLD SPRING LAKE ROAD
City-St-Zip: BROOKSVILLE, FL 34602

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: PAMELA S WILFONG

PD

04/17/2007

Electronic Signature of Signing Officer or Director

Date