## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000001672

FILED Feb 03, 2011 Secretary of State

Entity Name: TREASURE COAST CHRISTIAN ACADEMY INC.

Current Principal Place of Business: New Principal Place of Business:

590 NW PEACOCK BLVD.

SUITE #4

PORT ST LUCIE, FL 34986 US

Current Mailing Address: New Mailing Address:

590 NW PEACOCK BLVD.

SUITE #4

PORT ST LUCIE, FL 34986 US

FEI Number: 65-1018065 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

NETWIG, CYNTHIA NETWIG, CYNTHIA 1957 SW LENNOX STREET 6445 NW FAYE ST.

PORT ST LUCIE, FL 34953 US PORT ST LUCIE, FL 34986 US

20RT ST LUCIE, FL 34903 US PORT ST LUCIE, FL 34900 US

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: CYNTHIA NETWIG 02/03/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

 Name:
 NETWIG, WILLIAM F MR.

 Address:
 6445 NW FAYE ST.

 City-St-Zip:
 PORT ST LUCIE, FL 34986

Title: S

Name: TELLEX, MARGE K MRS.
Address: 2357 SW DEEPWOOD PASS
City-St-Zip: PALM CITY, FL 34990

Title:

 Name:
 NETWIG, CYNTHIA J MRS.

 Address:
 6445 NW FAYE ST.

 City-St-Zip:
 PORT ST. LUCIE, FL 34986

Title: [

Name: TELLEX, PETER A

Address: 2357 SW DEEPWOOD PASS City-St-Zip: PALM CITY, FL 34990

Title: VF

Name: SHACKELFORD, JAMES PASTOR Address: 2043 7TH COURT SOUTH

Address: 2043 / TH COURT SOUTH City-St-Zip: LAKE WORTH, FL 33461

Title: D

 Name:
 MACK, SHARON MRS.

 Address:
 111 SW LANDIS LANE

 City-St-Zip:
 PORT SAINT LUCIE, FL 34953

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 receive

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: CYNTHIA J. NETWIG T 02/03/2011