

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003137

FILED
Apr 20, 2010
Secretary of State

Entity Name: CORNERSTONE ACADEMY AND MINISTRIES, INC.

Current Principal Place of Business:

3536 NW 8TH AVENUE
GAINESVILLE, FL 32605

New Principal Place of Business:

3401 NW 34TH ST
GAINESVILLE, FL 32605

Current Mailing Address:

POST OFFICE BOX 357430
GAINESVILLE, FL 32635

New Mailing Address:

FEI Number: 59-3646631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLOVER, LAURA LEIGH
15714 SE 60 TERR.
MICANOPY, FL 32667 US

Name and Address of New Registered Agent:

LAWSON, DOUGLAS
15843 NW 222 ST
HIGH SPRINGS, FL 32647 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: DOUGLAS LAWSON

04/20/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD
Name: AROLA, GEORGE
Address: 7012 SW 97TH LANE
City-St-Zip: GAINESVILLE, FL 32608

Title: CEO
Name: LAWSON, DOUGLAS
Address: 15843 NW 222 ST
City-St-Zip: HIGH SPRINGS, FL 32647

Title: VCD
Name: PITTS, EVAN
Address: 3784 SW 56 RD
City-St-Zip: GAINESVILLE, FL 32608

Title: TD
Name: KINSMAN, LIANA
Address: 1801 NW 31ST TERR
City-St-Zip: GAINESVILLE, FL 32605

Title: D
Name: FLEMING, JOHN
Address: 4812 NW 58TH ST
City-St-Zip: GAINESVILLE, FL 32653

Title: D
Name: WITTE, JULIANA
Address: 503 SW 97TH TERR
City-St-Zip: GAINESVILLE, FL 32607 62

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: DOUGLAS LAWSON

CEO

04/20/2010

Electronic Signature of Signing Officer or Director

Date