2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2004
Secretary of State

DOCUMENT# N00000004179

Entity Name: THE CHRISTI ACADEMY, INC.

Current Principal Place of Business:

6855 W. COMMERCIAL BLVD.
TAMARAC, FL 33319 US

New Principal Place of Business:

Current Mailing Address:

6855 W. COMMERCIAL BLVD
TAMARAC, FL 33319 US

New Mailing Address:

FEI Number: 65-1016510 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HELLWEGE, NANCY
6855 W. COMMERCIAL BLVD.
TAMARAC, FL 33319 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: VPD ( ) Delete
Name: TARA, CREAGER C VPD
Address: 7701 SW 6TH STREET
City-St-Zip: N. LAUDERDALE, FL 33068 US

Title: TD ( ) Delete
Name: TOPPING, STEWART
Address: 10791 NW 21ST PLACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: PD ( ) Delete
Name: HELLWEGE, NANCY C
Address: 7701 SW 6TH STREET
City-St-Zip: N LAUDERDALE, FL 33068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: TARA, CREAGER C VPD
Address: 1625 S. FEDERAL HWY. #208
City-St-Zip: POMPANO BEACH, FL 33062 US

Title: TD (X) Change ( ) Addition
Name: FINIZIO, STEPHEN J TD
Address: 701 N.W. 13TH ST.
City-St-Zip: BOCA RATON, FL 33486

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 Section 119.07(3)(i), 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: TARA CREAGER VPD 08/04/2004

Electronic Signature of Signing Officer or Director — Date