

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00525

FILED
Apr 30, 2012
Secretary of State

Entity Name: TROPICAL ACRES CHRISTIAN ACADEMY, INC.

Current Principal Place of Business:

12107 RHODINE RD.
RIVERVIEW, FL 33579 US

New Principal Place of Business:

Current Mailing Address:

12107 RHODINE RD.
RIVERVIEW, FL 33579 US

New Mailing Address:

FEI Number: 59-2417373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAXE, REV. THOMAS C.
12107 RHODINE RD.
RIVERVIEW, FL 33579 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
Name: SAXE, REV. THOMAS C.
Address: 12107 RHODINE RD.
City-St-Zip: RIVERVIEW, FL 33579 US

Title: D
Name: PARKER, RUSSELL
Address: 199 PARKER LANE
City-St-Zip: VILLA RIDGE, IL 62996 US

Title: D
Name: CASTELLINI, ELENA M
Address: 8750 SYMMES RD
City-St-Zip: GIBSONTONTON, FL 33534 US

Title: TR
Name: SAXE, L. JEANNETTE (JAN)
Address: 12107 RHODINE RD.
City-St-Zip: RIVERVIEW, FL 33579 US

Title: D
Name: SAXE, CHARLES R
Address: 132 VALLEY CIRCLE
City-St-Zip: BRANDON, FL 33510 US

Title: SEC
Name: PROENZA, SYLVIA
Address: 12411 ELNORA DR
City-St-Zip: RIVERVIEW, FL 33579 US

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: REV THOMAS C SAXE

PD

04/30/2012

Electronic Signature of Signing Officer or Director

Date