2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0100006029

FILED Jan 28, 2009 Secretary of State

Entity Name: YVONNE C. REED CHRISTIAN SCHOOL, INC.

Current Principal Place of Business: New Principal Place of Business: 3455-26TH AVE. SO SAINT PETERSBURG, FL 33711 **Current Mailing Address: New Mailing Address:** 3455-26TH AVE. SO SAINT PETERSBURG, FL 33711 FEI Number: 59-3755867 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CLAYTON, YVONNE C 1661 25TH AVE. SOUTH ST. PETERSBURG, FL 337123635 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CLAYTON, YVONNE C Name: Name: 1661 25TH AVE. SOUTH Address: Address: City-St-Zip: ST. PETERSBURG, FL 337123635 City-St-Zip: Title: Title: () Delete () Change () Addition FRANKLIN, JOHNNYE Name: Name: Address: 4201 1ST AVE. SO. Address: City-St-Zip: ST. PETERSBURG, FL 33771 City-St-Zip: Title: () Delete Title: () Change () Addition HAYWARD, BETTY Name: Name: Address: 5234 9TH ST. SO. Address: City-St-Zip: ST. PETERSBURG, FL 33705 City-St-Zip: Title: () Delete Title: () Change () Addition Name: DAVIS, RONALD Name: 2621 MLK STREET SOUTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33705 City-St-Zip: Title: () Delete Title: () Change () Addition PIERCE, JUANITA Name: Name: 1939 31ST ST. SO. Address: Address: City-St-Zip: ST. PETERSBURG, FL 33712 City-St-Zip: Title: () Delete Title: () Change () Addition THOMAS, MARY Name: Name: Address: 4413 14TH AVE. SO. Address: ST. PETERSBURG, FL 33711 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: YVONNE C. CLAYTON PRES 01/28/2009