2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000007143

FILED Oct 05, 2006 Secretary of State

Entity Name: FLORIDA CHRISTIAN INSTITUTE FOR ACADEMIC EXCELLENCE, INC.

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

2830 WINKLER AVE 3760 SCHOOLHOUSE RD W SUITE 201 FT. MYERS, FL 33916

FT. MYERS, FL 33916

Current Mailing Address: New Mailing Address:

2830 WINKLER AVE 3760 SCHOOLHOUSE RD W SUITE 201 FT. MYERS, FL 33916

FT. MYERS, FL 33916

FEI Number: 01-0594143 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:

LEONARDO, KEITH
2830 WINKLER AVE
SUITE 201

LEONARDO, KEITH
3760 SCHOOLHOUSE RD W
FT. MYERS, FL 33916 US

FT. MYERS, FL 33916 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: KEITH LEONARDO 10/05/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: LEONARDO, KEITH Name: LEONARDO, KEITH

 Address:
 9794 BAY HARBOR CIRCLE
 Address:
 3760 SCHOOLHOUSE RD W

 City-St-Zip:
 FT. MYERS, FL 33916
 City-St-Zip:
 FT. MYERS, FL 33916

 Name:
 HICKS, RICARDO
 Name:

 Address:
 13161 CORBEL, APT. 822
 Address:

 City-St-Zip:
 FT. MYERS, FL 33917
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

Name:JENSEN, RICHARDName:Address:1206 HIBISCUS AVENUEAddress:City-St-Zip:LEHIGH ACRES, FL 33936City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: KEITH LEONARDO DIR 10/05/2006