2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000813

FILED Apr 20, 2007 Secretary of State

Entity Name: CHRISTIAN HOME EDUCATORS OF SOUTHWEST FLORIDA, INC.

Current Principal Place of Business:

2655 N AIRPORT ROAD
FT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address: New Mailing Address:

PO BOX 61845 FT MYERS, FL 339061845

FEI Number: 65-1068374 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:

LETCHER, DEBBIE

50 ALAN AVENUE SOUTH
LEHIGH ACRES, FL 33971
US

BENSON, CAROL
3116 RIVER GROVE CIRCLE
FORT MYERS, FL 33905
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: CAROL BENSON 04/20/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: () Change () Addition Name: OSTERHOUSE, DENNIS Name:

Address: 1711 ST. CLAIR AVE. EAST Address: City-St-Zip: N. FT. MYERS, FL 33903 US City-St-Zip:

Title: V () Delete Title: V (X) Change () Addition Name: MARY, SWORDS Name: MARY, SWORDS

Address: 2029 N.E. 7TH PLACE Address: 12719 STONE TOWER LOOP
City-St-Zip: CAPE CORAL, FL 33909 US City-St-Zip: FORT MYERS, FL 33913 US

Title: S () Delete Title: () Change () Addition

 Name:
 BENSON, CAROL
 Name:

 Address:
 3116 RIVER GROVE CIRCLE
 Address:

 City-St-Zip:
 FT MYERS, FL 33905
 City-St-Zip:

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

Name:SWORDS, MICHAELName:SWORDS, MICHAELAddress:2029 N.E. 7TH PLACEAddress:12719 STONE TOWER LOOPCity-St-Zip:CAPE CORAL, FL 33909 USCity-St-Zip:FORT MYERS, FL 33913 US

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: MICHAEL SWORDS T 04/20/2007