

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90104 009 ****61.25

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| DOCUMENT # N02000003739 1. Entity Name MILLENNIAL CHRISTIAN SCHOOLS, INC. | | | | | |
| Principal Place of Business 9864 STANFORD BRIDGE DR JACKSONVILLE, FL 32221 | | | Mailing Address 9864 STANFORD BRIDGE DR JACKSONVILLE, FL 32221 | | |
| 2. Principal Place of Business 4200 Georgetown Drive <small>Suite, Apt. #, etc.</small> | | 3. Mailing Address 4200 Georgetown Drive <small>Suite, Apt. #, etc.</small> | | 01172008 Chg-NP CR2E037 (11/05) | |
| City & State Jacksonville, FL <small>Zip Country</small> 32210 USA | | City & State Jacksonville, FL <small>Zip Country</small> 32210 USA | | 4. FEI Number 03-0451207 | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | | | Applied For <input type="checkbox"/> Not Applicable | |
| 6. Name and Address of Current Registered Agent MCCARTHY, MARIA 9864 STANFORD BRIDGE DR JACKSONVILLE, FL 32221 | | | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. | | | | | |
| SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small> | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2006 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | Make check payable to Florida Department of State | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD MCCARTHY, MARIA <input type="checkbox"/> Delete 9864 STANFORD BRIDGE DRIVE JACKSONVILLE, FL 32221 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VP WOODBIDGE, JERRY <input type="checkbox"/> Delete 4062 GREENWILLOW LANE EAST JACKSONVILLE, FL 32277 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD GAUDINO, JOSEPH <input type="checkbox"/> Delete 1354 MCGIRTS CREEK DRIVE W JACKSONVILLE, FL 32221 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD HUMPHRIES, PATRICIA <input type="checkbox"/> Delete 2520 BULLS BAY HWY JACKSONVILLE, FL 32220 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE: Maria McCarthy President <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | 1/17/06 (904) 772-6400 <small>Date Daytime Phone #</small> | | |