

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004884

FILED  
Apr 21, 2007  
Secretary of State

Entity Name: IRENE'S CHRISTIAN ACADEMY, INC.

## Current Principal Place of Business:

5825 PONDWOOD CT  
ORLANDO, FL 32810

## New Principal Place of Business:

3403 NORTH PINE HILLS ROAD  
ORLANDO, FL 32808

## Current Mailing Address:

5825 PONDWOOD CT  
ORLANDO, FL 32810

## New Mailing Address:

FEI Number: 01-0731740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PROSPERE, IRENE  
5825 PONDWOOD CT  
ORLANDO, FL 32810 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: D ( ) Delete  
Name: PROSPERE, IRENE  
Address: 5825 PONDWOOD CT  
City-St-Zip: ORLANDO, FL 32810

Title: D ( ) Delete  
Name: WEEKES, JOHN DR.  
Address: 621 ASHBERRY LN  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D ( ) Delete  
Name: LEE, CECILE  
Address: 6645 HAWKSMOOR DR  
City-St-Zip: ORLANDO, FL 32818

Title: M ( ) Delete  
Name: FRANCIS, JANICE  
Address: 5831 PONDWOOD COURT  
City-St-Zip: ORLANDO, FL 3281

Title: M ( ) Delete  
Name: FERGUSON, ELSIE  
Address: 5828 WYAT COURT  
City-St-Zip: ORLANDO,, FL 32810

Title: T ( ) Delete  
Name: PROSPERE, IRENE  
Address: 5825 PONDWOOD COURT  
City-St-Zip: ORLANDO, FL 3281

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-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: IRENE PROSPERE

D

04/21/2007

Electronic Signature of Signing Officer or Director

Date