

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006133

FILED  
May 25, 2005  
Secretary of State

**Entity Name:** GERALDINE RANSOME FIELDS CHRISTIAN ACADEMY, INC.

**Current Principal Place of Business:**

10745 WAKE FOREST AVE.  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

195 TALLULAH AVE  
JACKSONVILLE, FL 32208

**Current Mailing Address:**

11647 HARTS RD  
JACKSONVILLE, FL 32218

**New Mailing Address:**

**FEI Number:** 54-2071192      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

FIELDS, KEITH  
10745 WAKE FOREST AVE.  
JACKSONVILLE, FL 32218      US

**Name and Address of New Registered Agent:**

FIELDS, KEITH  
195 TALLULAH AVE  
JACKSONVILLE, FL 32208      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: \_\_\_\_\_

05/25/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: HENDERSON, GALYNDA  
Address: 10745 WAKE FOREST AVE.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VD      ( ) Delete  
Name: HENDERSON, DONALD  
Address: 10745 WAKE FOREST AVE.  
City-St-Zip: JACKSONVILLE, FL 32218

Title: STD      ( ) Delete  
Name: FIELDS, KEITH  
Address: 11660 JACKMAN COVE LANE  
City-St-Zip: JACKSONVILLE, FL 32218

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: HENDERSON, GALYNDA  
Address: 11647 HARTS ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

Title: VD      (X) Change ( ) Addition  
Name: HENDERSON, DONALD  
Address: 11647 HARTS ROAD  
City-St-Zip: JACKSONVILLE, FL 32218

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 Section 119.07(3)(i), 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: DONALD HENDERSON

VD

05/25/2005

Electronic Signature of Signing Officer or Director

Date