

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006133

FILED  
Feb 29, 2008  
Secretary of State

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

**Current Principal Place of Business:**

195 TALLULAH AVE  
JACKSONVILLE, FL 32208 US

**New Principal Place of Business:**

**Current Mailing Address:**

11647 HARTS RD  
JACKSONVILLE, FL 32218 US

**New Mailing Address:**

**FEI Number:** 54-2071192

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FIELDS, KEITH  
11939 IRON CREEK RD  
JACKSONVILLE, FL 32218 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: PD ( ) Delete  
Name: HENDERSON, GALYNDA  
Address: 11647 HARTS ROAD  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: VP ( ) Delete  
Name: HENDERSON, DONALD  
Address: 11647 HARTS ROAD  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: STD ( ) Delete  
Name: FIELDS, KEITH  
Address: 11939 IRON CREEK RD  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: DIR (X) Delete  
Name: ROBERTSON, RODERICK DIR  
Address: 2242 FOREST HILL RD  
City-St-Zip: JACKSONVILLE, FL 32208 US

Title: DIR (X) Delete  
Name: SAMPSON, JOAN DIR  
Address: 11566 KEY BISCAYNE DR  
City-St-Zip: JACKSONVILLE, FL 32218 US

Title: DIR (X) Delete  
Name: WHITE, LEVI DIR  
Address: 195 TALLULAH AVE  
City-St-Zip: JACKSONVILLE, FL 32208 US

**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 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:** DONALD HENDERSON

VP

02/29/2008

Electronic Signature of Signing Officer or Director

Date