

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001045

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: MOUNT HERMON CHRISTIAN SCHOOL, INC.

## Current Principal Place of Business:

2856 DOUGLAS AVE.  
FORT MYERS, FL 33916

## New Principal Place of Business:

## Current Mailing Address:

2856 DOUGLAS AVE.  
FORT MYERS, FL 33916

## New Mailing Address:

2856 DOUGLAS STREET  
FORT MYERS, FL 33916

FEI Number: 57-1167769

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SNELL, MARY V  
1833 HENDRY STREET  
FORT MYERS, FL 33901 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: WHITE, FREDERICK A  
Address: 1400 BILLIE STREET  
City-St-Zip: FORT MYERS, FL 33916

Title: DS ( ) Delete  
Name: WHITE, MAGGIE L  
Address: 1400 BILLIE STREET  
City-St-Zip: FORT MYERS, FL 33916

Title: D ( ) Delete  
Name: GLOVER, WILLIAM L SR,  
Address: 12902 IVORY STONE LOOP  
City-St-Zip: FORT MYERS, FL 33913

Title: D ( ) Delete  
Name: GANZY, EARNESTINE  
Address: PO BOX 2035  
City-St-Zip: FORT MYERS, FL 33916

Title: D ( ) Delete  
Name: LAWRENCE, CALLIE  
Address: 3102 LAFAYETTE STREET  
City-St-Zip: FORT MYERS, FL 33916

Title: PD ( ) Delete  
Name: MORRIS, RALPH W  
Address: 248 SE 2ND TERRACE  
City-St-Zip: CAPE CORAL, FL 33990

## 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: D (X) Change ( ) Addition  
Name: LAWRENCE, CALLIE  
Address: 2804 VIA LOOP  
City-St-Zip: FORT MYERS, FL 33905

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: FREDERICK A. WHITE

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date