


**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # N03000001516</b> 1. Entity Name SHEKINAH CHRISTIAN ACADEMY, INC.	
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Principal Place of Business 10551 BEACH BOULEVARD JACKSONVILLE, FL 32246	Mailing Address 10551 BEACH BOULEVARD JACKSONVILLE, FL 32246
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04182007 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 56-2373967	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  WASHINGTON, APRIL 10551 BEACH BOULEVARD JACKSONVILLE, FL 32246
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**DO NOT WRITE  
IN THIS SPACE**

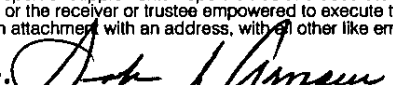
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

<b>Filing Fee is \$61.25 Due by May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARMOUR, SAUNDRA L 10551 BEACH BLVD JACKSONVILLE, FL 32246
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PEHAWAY, BRODERICK 10551 BEACH BLVD JACKSONVILLE, FL 32246
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05/03/07-80012-018 70.00

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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 an other like empowered.	
<b>SIGNATURE:</b>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	4/18/07 (904) 421-1015 <small>Daytime Phone #</small>