2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007106

City-St-Zip:

KISSIMMEE, FL 34744

Entity Name: SOUTHLAND CHRISTIAN SCHOOL, INC.

FILED Jan 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2901 17TH ST ST CLOUD, FL 34769 US **Current Mailing Address: New Mailing Address:** 2901 17TH ST ST CLOUD, FL 34769 US FEI Number: 31-1481089 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ENNIS, JON R 2991 5TH ST ST. CLOUD, FL 34744 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ENNIS, JON R Name: Name: 2991 5TH ST Address: Address: City-St-Zip: ST.CLOUD, FL 34769 US City-St-Zip: Title: VPD Title: () Delete () Change () Addition ENNIS, JULIE A Name: Name: Address: 2991 5TH ST Address: City-St-Zip: ST.CLOUD, FL 34769 US City-St-Zip: Title: SD () Delete Title: SD (X) Change () Addition HAYNIE, PAM BAKER, DIANE Name: Name: 2480 PARSONS POND Address: 1570 FRANCES ST Address: City-St-Zip: KISSIMMEE, FL 34744 US City-St-Zip: KISSIMMEE, FL 34743 US Title: Title: D (X) Change () Addition () Delete Name: KRAUSE, ROY Name: WEISS, CRAIG 701 CYPRESS AV Address: 2155 BARRATT CT Address: City-St-Zip: SAINT CLOUD, FL 34771 City-St-Zip: SAINT CLOUD, FL 34769 Title: (X) Delete Title: () Change () Addition MILETO, DOTTIE Name: Name: 112 HARWOOD CIRCLE Address: Address:

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.

City-St-Zip:

SIGNATURE: JULIE ENNIS VPD 01/30/2007