2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400002000

FILED May 03, 2006 Secretary of State

Entity Name: COMMUNITY CHRISTIAN SCHOOL OF SOUTHWEST FLORIDA, INC. **Current Principal Place of Business: New Principal Place of Business:** 2507 DELPRADO BLVD. CAPE CORAL, FL 33904 US **Current Mailing Address: New Mailing Address:** 15201 N. CLEVELAND AV. 15201 N. CLEVELAND AV. **PMR 168** PMB #168 NORTH FORT MYERS, FL 33903 LIS NORTH FORT MYERS, FL 33903 US FEI Number: 20-0814739 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () 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: Name and Address of New Registered Agent: DAVIS, AMY DAVIS, AMY J 524 SÉ 17TH PLACE 17381 KENTARA WAY CAPE CORAL, FL 33990 US US FORT MYERS, FL 33913 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: AMY J DAVIS 05/03/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition DAVIS, AMY DAVIS, AMY Name: Name: Address: 524 SE 17TH PLACE Address: 17381 KENTARA WAY City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: FORT MYERS, FL 33913 Title: () Delete Title: () Change () Addition Name: COE, DEBBI Name: Address: 8724 CREST LANE Address: City-St-Zip: FT MYERS, FL 33907 City-St-Zip: Title: () Delete Title: () Change () Addition ARCENTALES, DONNA Name: Name: 11181 BENT PINE DR. Address: Address: City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: FREW, TINA 13289 GREYWOOD CIRCLE Address: Address: City-St-Zip: City-St-Zip: FORT MYERS, FL 33913

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.

SIGNATURE: AMY J DAVIS Ρ 05/03/2006