

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005139

FILED
Feb 16, 2006
Secretary of State

Entity Name: AMBASSADOR CHRISTIAN ACADEMY, INC.

Current Principal Place of Business:

19851 LEONARD ROAD
LUTZ, FL 33558 US

New Principal Place of Business:

333 W. RIO VISTA COURT
TAMPA, FL 33604 US

Current Mailing Address:

19851 LEONARD ROAD
LUTZ, FL 33558 US

New Mailing Address:

8870 N. HIMES AVENUE
#325
TAMPA, FL 33614 US

FEI Number: 14-1909253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIMES, JAMES W
19851 LEONARD ROAD
LUTZ, FL 33558 US

Name and Address of New Registered Agent:

BENDT, VALERIE
333 W. RIO VISTA COURT
TAMPA, FL 33604 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: VALERIE BENDT

02/16/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR. () Delete
Name: HIMES, JUDITH M
Address: 19851 LEONARD ROAD
City-St-Zip: LUTZ, FL 33558 US

Title: DIR. () Delete
Name: HIMES, JAMES W
Address: 19851 LEONARD ROAD
City-St-Zip: LUTZ, FL 33558 US

Title: DIR. () Delete
Name: TWINING, JULIE A
Address: 22203 LAVER LANE
City-St-Zip: LAND O' LAKES, FL 34639 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR. (X) Change () Addition
Name: BENDT, VALERIE
Address: 333 W. RIO VISTA COURT
City-St-Zip: TAMPA, FL 33604 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JUDITH M. HIMES

DIR

02/16/2006

Electronic Signature of Signing Officer or Director

Date