2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005316

FILED Jan 12, 2007 Secretary of State

Entity Name: COMMONWEALTH CHRISTIAN ACADEMY, INC.

Current Principal Place of Business: New Principal Place of Business: 5231 S. NOVA RD. PORT ORANGE, FL 32127 **Current Mailing Address: New Mailing Address:** 5231 S. NOVA RD PORT ORANGE, FL 32127 FEI Number: 37-1491674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, STEPHEN E 5231 SOUTH NOVA ROAD PORT ORANGE, FL 32127 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: () Delete P,D () Change () Addition JOHNSON, STEPHEN E Name: Name: 5231 SOUTH NOVA ROAD Address: Address: City-St-Zip: PORT ORANGE, FL 32127 US City-St-Zip: Title: S.D () Delete Title: () Change () Addition Name: JOHNSON, CAROL G Name: Address: 5231 SOUTH NOVA ROAD Address: City-St-Zip: PORT ORANGE, FL 32127 US City-St-Zip: Title: () Delete Title: () Change () Addition JOHNSON, TIMOTHY N Name: Name: Address: 5231 SOUTH NOVA ROAD Address: City-St-Zip: PORT ORANGE, FL 32127 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: JOHNSON, RUTH G Name: JOHNSON, RUTH G 2705 AUTUMN LEAVES DRIVE 5231 SOUTH NOVA ROAD Address: Address: City-St-Zip: PORT ORANGE, FL 32128 City-St-Zip: PORT ORANGE, FL 32127

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: STEPHEN E. JOHNSON **PRES** 01/12/2007