

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N04000007117

1. Entity Name

PLANTATION CHRISTIAN ACADEMY, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 SEP 26 AM 11:45

66027371



Principal Place of Business
6263 ROOSEVELT BLVD
JACKSONVILLE FL 32244

Mailing Address
3936 FOURAKER ROAD
JACKSONVILLE FL 32210

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E037 (5/05)

4. FEI Number

74-3126913

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MURRAY, AVIS A REV.
3936 FOURAKER ROAD
JACKSONVILLE FL 32210

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9/7/05

FILE NOW: FEE IS \$61.25
Due By September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. P OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MURRAY, AVIS A REV.
3936 FOURAKER ROAD
JACKSONVILLE FL 32210
vp President ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CAMPANALE, HEATHER D
6233 ALFREDO DRIVE WEST
JACKSONVILLE FL 32244
2VP ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EVANS, THOMAS W
801 WHITMAN DRIVE
DEXTER MO 63841
2VP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Officer
Paul L. Murray
13839 Lem Turner Rd
Jacksonville, FL 32218 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
400060049864
09/28/05--01050--016 **70.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 all other like empowered.

SIGNATURE

Paul L. Murray

9/7/05

9/7/05