

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007323

FILED  
Apr 16, 2008  
Secretary of State

Entity Name: NEARHIM HOME EDUCATORS, INC.

## Current Principal Place of Business:

246 TIMBERLAND AVE.  
LONGWOOD, FL 32750 US

## New Principal Place of Business:

1759 SUNWOOD DR.  
LONGWOOD, FL 32779 US

## Current Mailing Address:

246 TIMBERLAND AVE.  
LONGWOOD, FL 32750 US

## New Mailing Address:

1759 SUNWOOD DR.  
LONGWOOD, FL 32779 US

FEI Number: 20-1483843

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARR, DENISE  
246 TIMBERLAND AVE.  
LONGWOOD, FL 32750 US

## Name and Address of New Registered Agent:

LAIRD, CHRISTINE L MRS.  
1759 SUNWOOD DR  
LONGWOOD, FL 32779 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: CHRISTINE L. LAIRD

04/16/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LAIRD, CHRISTINE  
Address: 1759 SUNWOOD  
City-St-Zip: LAKE MARY, FL 32746 US

Title: V ( ) Delete  
Name: OHMSTEDE, MANDY  
Address: 5877 AUTUMN CHASE CIRCLE  
City-St-Zip: SANFORD, FL 32773 US

Title: T ( ) Delete  
Name: GARRETT, TAMBERLIN  
Address: 510 GUMWOOD COURT  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

Title: S ( ) Delete  
Name: CARR, DENISE  
Address: 246 TIMBERLAND AVE.  
City-St-Zip: LONGWOOD, FL 32750 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: OHMSTEDE, MANDY  
Address: 5877 AUTUMN CHASE CIRCLE  
City-St-Zip: SANFORD, FL 32773 US

Title: V (X) Change ( ) Addition  
Name: PRICE, LUCEE  
Address: 520 WEBSTER ST  
City-St-Zip: LAKE MARY, FL 32746 US

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

Title: S (X) Change ( ) Addition  
Name: FLOYD, CINDY  
Address: 37159 FORESTDELL DR  
City-St-Zip: EUSTIS, FL 32736 US

I hereby certify that the information supplied with this filing does not qualify 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: MANDY OHMSTEDE

P

04/16/2008

Electronic Signature of Signing Officer or Director

Date