

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009721

FILED
Feb 24, 2009
Secretary of State

Entity Name: FIRST CHRISTIAN ACADEMY & LEARNING CENTER, INC.

Current Principal Place of Business:

2795 KEYSTONE ROAD
TARPON SPRINGS, FL 34689

New Principal Place of Business:

2795 KEYSTONE ROAD
TARPON SPRINGS, FL 34688

Current Mailing Address:

2795 KEYSTONE ROAD
TARPON SPRINGS, FL 34689

New Mailing Address:

2795 KEYSTONE ROAD
TARPON SPRINGS, FL 34688

FEI Number: 20-3924491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORRENCE, ALFRED W JR
6645 RIDGE RD
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

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:

Title: DS () Delete
Name: MOBERLEY, DEBORAH
Address: 2795 KEYSTONE RD
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: INNOCENZI, CHUCK
Address: 2795 KEYSTONE ROAD
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: HAAS, ROXANNE
Address: 2795 KEYSTONE ROAD
City-St-Zip: TARPON SPRINGS, FL 34688

Title: DT () Delete
Name: JONES, PATRICIA
Address: 2795 KEYSTONE ROAD
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D () Delete
Name: CORRIS, ROBERT
Address: 2795 KEYSTONE ROAD
City-St-Zip: TARPON SPRINGS, FL 34688

Title: DP () Delete
Name: STEGE, JOHN
Address: 2795 KEYSTONE ROAD
City-St-Zip: TARPON SPRINGS, FL 34688

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: DT (X) Change () Addition
Name: FURNISH, DAVE
Address: 2795 KEYSTONE ROAD
City-St-Zip: TARPON SPRINGS, FL 34688

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

Title: DP (X) Change () Addition
Name: STEINORTH, CHAD
Address: 2795 KEYSTONE ROAD
City-St-Zip: TARPON SPRINGS, FL 34688

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: JOSEPH P. MILANA JR.

DO

02/24/2009

Electronic Signature of Signing Officer or Director

Date