2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05605

FILED Aug 04, 2006 Secretary of State

Entity Name: AUCILLA CHRISTIAN ACADEMY BOOSTERS, INC.

Current Principal Place of Business: New Principal Place of Business:

240 W. WASHINGTON ST.240 W. WASHINGTON STMONTICELLO, FL 32344MONTICELLO, FL 32344

Current Mailing Address: New Mailing Address:

240 W. WASHINGTON ST.

MONTICELLO, FL 32344

288 LUKENS ROAD
MONTICELLO, FL 32344

FEI Number: 59-2435410 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MILLER, GEORGE 240 W WASHINGTON STREET MONTICELLO, FL 32344 US

OFFICERS AND DIRECTORS:

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

Electronic Olghature of Registered A

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Delete Title: PD (X) Change () Addition

Name: REAMS, HUGH Name: TUTEN, GARY PRES
Address: P. O. BOX 14 Address: RT. 2 BOX 6-G

City-St-Zip: GREENVILLE, FL 32331 City-St-Zip: MONTICELLO, FL 32344

Title: Title: (X) Change () Addition () Delete Name: GUNNELS, BILL Name: CARSWELL, SHERRY L TREAS Address: 800 S JEFFERSON ST Address: 288 LUKENS ROAD City-St-Zip: MONTICELLO, FL 32344 City-St-Zip: MONTICELLO, FL 32344

Title: SD () Delete Title: SD (X) Change () Addition Name: CARSWELL, SHERRI Name: DOBSON, RHONDA SEC

Address: 288 LUKENS RD Address: AUCILLA HIGHWAY
City-St-Zip: MONTICELLO, FL 32344 City-St-Zip: MONTICELLO, FL 32344

Title: D (X) Delete Title: () Change () Addition

 Name:
 TUTEN, GARY
 Name:

 Address:
 ASHVILLE HIGHWAY
 Address:

 City-St-Zip:
 MONTICELLO, FL 32344
 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: SHERRY CARSWELL TR 08/04/2006