2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05605

FILED Mar 26, 2009 Secretary of State

Entity Name: AUCILLA CHRISTIAN ACADEMY BOOSTERS, INC.

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

240 W. WASHINGTON ST MONTICELLO, FL 32344

Current Mailing Address: New Mailing Address:

P.O. BOX 67 P.O. BOX 116 PINETTA, FL 32350

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

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

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

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

 Name:
 DRIGGERS, DAVID PRES
 Name:
 BELLEGARDE, JOHN PRES

 Address:
 184 HUNTER RIDGE RD
 Address:
 15559 WEST U. S. 90

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

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

 Name:
 WATTS, CYNTHIA J TREAS
 Name:
 WATTS, CYNTHIA J TREAS

 Address:
 P.O. BOX 67
 Address:
 P.O. BOX 116

 City-St-Zip:
 LEE, FL 32059
 City-St-Zip:
 PINETTA, FL 32350

Title: () Delete Title: (X) Change () Addition DOBSON, RONDA SEC ROBERTS, TONYA SEC Name: Name: 817 BLUE LAKE RD Address: Address: 4033 NORTH JEFFERSON ST City-St-Zip: MONTICELLO, FL 32344 City-St-Zip: MONTICELLO, FL 32344

Title: VP () Delete Title: () Change () Addition Name: SADLER, JOE V P Name:

 Name:
 SADLER, JOE V P
 Name:

 Address:
 3195 HENRY GIBSON RD
 Address:

 City-St-Zip:
 PERRY, FL 32348
 City-St-Zip:

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: CYNTHIA J WATTS TR 03/26/2009