2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N06000003413

Entity Name: SOUTH FLORIDA PREPARATORY CHRISTIAN ACADEMY, INC.

Current Principal Place of Business:

307 NW 3RD CT
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

307 NW 3RD CT
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 20-4606555 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, JULIUS
307 NW 3RD CT
HALLANDALE, FL 33009 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: D ( ) Delete
Name: BROWN, JULIUS
Address: 307 NW 3RD CT
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Delete
Name: BROWN, CLARA
Address: 307 NW 3RD CT
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Delete
Name: BROWN, DAVIDA
Address: 620 NW 3RD CT
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D ( ) Delete
Name: BROWN, WALLACE
Address: 307 NW 3RD COURT
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Delete
Name: HUGLEY, ANTHONY
Address: 307 NW 3RD COURT
City-St-Zip: HALLANDALE, FL 33009

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: TODMAN, HENRY
Address: 211 AVONDALE DR
City-St-Zip: POMPANO BEACH, FL 33060

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

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

Title: D ( ) Change (X) Addition
Name: MONICA, BROWN
Address: 211 AVONDALE DR
City-St-Zip: POMPANO BEACH, FL 33060

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: JULIUS BROWN PRE 03/23/2009

Electronic Signature of Signing Officer or Director — Date