2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2009
Secretary of State

DOCUMENT# N06000006480

Entity Name: NATIONAL ASSOCIATION FOR CHRISTIAN EDUCATION, INC.

Current Principal Place of Business:

4325 HWY 17 SOUTH
ORANGE PARK, FL 32003

New Principal Place of Business:

Current Mailing Address:

4325 HWY 17 SOUTH
ORANGE PARK, FL 32003

New Mailing Address:

FEI Number: 13-4344989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROONEY, J. MICHAEL ESQ
306 OLYMPIA AVE
PUNTA GORDA, FL 32950 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: PD ( ) Delete
Name: KAGER, MELISSE
Address: 411 LUCYS LN
City-St-Zip: ORANGE PARK, FL 32003

Title: SD ( ) Delete
Name: MCDANIEL, ALLEN
Address: 6336 BUFORD STREET., 604
City-St-Zip: ORLANDO, FL 32835

Title: TD ( ) Delete
Name: KAGER, MELODY
Address: 393 LUCYS LN
City-St-Zip: ORANGE PARK, FL 32003

Title: D ( ) Delete
Name: HESTON, RICHARD P
Address: 195 SE BILLOWING GLEN
City-St-Zip: LAKE CITY, FL 32024

Title: E ( ) Delete
Name: CAMPBELL, JEFF
Address: BOX 594
City-St-Zip: FLORAHOME, FL 32140

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: MELISSE S. KAGER PRES 03/22/2009

Electronic Signature of Signing Officer or Director — Date