

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 14, 2009
Secretary of State

DOCUMENT# N07000002890

Entity Name: REDMOND CHRISTIAN SCHOOL, INC.

Current Principal Place of Business:

709 SW SHERLOCK TERRACE
LAKE CITY, FL 32024

New Principal Place of Business:

Current Mailing Address:

PO BOX 7004
LAKE CITY, FL 32055

New Mailing Address:

FEI Number: 91-1217914 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

CHEUNG, TERESA Y
709 SW SHERLOCK TERRACE
LAKE CITY, FL 32024 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: FARRIS, JO H
Address: 709 SW SHERLOCK TERRACE
City-St-Zip: LAKE CITY, FL 32024

Title: VPD () Delete
Name: FARNHAM, KATHLEEN F
Address: 480 SW SHERLOCK TERRACE
City-St-Zip: LAKE CITY, FL 32024

Title: SD () Delete
Name: HOWE, GRACE
Address: 6338 DAYLIGHT DR
City-St-Zip: AGOURA HILLS, CA 91301

Title: TD () Delete
Name: CHEUNG, TERESA Y
Address: 709 SW SHERLOCK TERRACE
City-St-Zip: LAKE CITY, FL 32024

Title: D () Delete
Name: FARRIS, SASHA H
Address: 709 SW SHERLOCK TERRACE
City-St-Zip: LAKE CITY, FL 32024

Title: D () Delete
Name: TALICH, ALYSSA K
Address: 480 SW SHERLOCK TERRACE
City-St-Zip: LAKE CITY, FL 32024

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:

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: KATHLEEN F. FARNHAM

VPD

08/14/2009

Electronic Signature of Signing Officer or Director

_____ Date