

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002059

FILED  
Mar 03, 2009  
Secretary of State

**Entity Name:** SAVING OUR DAUGHTERS AND SONS LIVES CHRISTIAN ACADEMY INC.

**Current Principal Place of Business:**

14600 GATEWAY PT. CI  
APT. 13207  
ORLANDO,, FL 32821

**New Principal Place of Business:**

**Current Mailing Address:**

14600 GATEWAY PT. CI  
APT. 13207  
ORLANDO,, FL 32821

**New Mailing Address:**

**FEI Number:** 80-0173143      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

THOMAS, MARC L  
CAMDEN APARTMENTS 14600 GATEWAY POINT CIR  
APT. 13207  
ORLANDO, FL 32821 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: DIR. ( ) Delete  
Name: DAVIS-THOMAS, DIANE D  
Address: CAMDEN APARTMENTS 14600 GATEWAY POINT CIR  
City-St-Zip: APT. 13207 ORLANDO, FL 32821

Title: DIR ( ) Delete  
Name: MAHESSE, MARILYN R  
Address: 12655 INDIANA WOOD LN  
City-St-Zip: ORLANDO, FL 32824

Title: DIR. ( ) Delete  
Name: ABLACK, CATHY R  
Address: 4071 VISTA DELARGO  
City-St-Zip: ORLANDO, FL 33881

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DIR. (X) Change ( ) Addition  
Name: WILLIAMS, CARLENA A OFF/DIR  
Address: 3818 N. 37TH STREET  
City-St-Zip: MILWAUKEE, WI 53216

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: OFFICER/DIRECTOR,CARLENA A. WILLIAMS

O/D

03/03/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date