2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006010

FILED Apr 23, 2009 Secretary of State

| Entity Nai | me: HOGAN | I CHRISTIAN PRESCHOOL I | NCORPORATED | | | |
|---|----------------------------|---|---|---|---|--|
| Current P | rincipal Plac | e of Business: | New Prin | New Principal Place of Business: | | |
| 8045 HOG JACKSON | AN RD. WILLE, FL 32 | 2216 | | | | |
| Current M | lailing Addre | ess: | New Mail | New Mailing Address: | | |
| 8045 HOG JACKSON | SAN RD. IVILLE, FL 32 | 2216 | | | | |
| FEI Number: 26-2877374 FEI Number Applied For () | | FEI Number Not App | FEI Number Not Applicable () Certificate of Status Desired () | | | |
| Name and Address of Current Registered Agent: | | | Name and | Name and Address of New Registered Agent: | | |
| 8045 HOO JACKSON The above in the State | e of Florida. | 2216 US | e purpose of changing | its register | red office or registered agent, or both, | |
| SIGNATUI | | onic Signature of Registered / | Aaent | | Date | |
| OFFICERS AND DIRECTORS: | | | _ | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | |
| Title: Name: Address: City-St-Zip: | CARDENAS, Ì 3554 PEACH | | Title: Name: Address: City-St-Zip: | 3554 PEA | (X) Change () Addition AS, RENEE ACH DRIVE JVILLE, FL 32246 | |
| Title: Name: Address: City-St-Zip: | ESSARY, SHI 2256 IRONST | | Title: Name: Address: City-St-Zip: | | (X) Change () Addition CINDY ST RIDE DRIVE IVILLE, FL 32223 | |
| Title: Name: Address: City-St-Zip: | WILLIAMSON 9567 SOUTHI |) Delete I, STEPHANIE BROOK DR. LE, FL 32256 | Title: Name: Address: City-St-Zip: | | () Change () Addition | |
| Title: Name: Address: | (|) Delete | Title: Name: Address: | | ()Change(X)Addition ND, PETER A RTINGLEN COURT | |

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: PETER A COPELAND RΑ 04/23/2009