

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09285

FILED  
Apr 20, 2006  
Secretary of State

**Entity Name:** PROVIDENCE CHRISTIAN SCHOOL ASSOCIATION, INC.

**Current Principal Place of Business:**

701 MOHAWK PARKWAY  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

701 MOHAWK PARKWAY  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 59-2578577

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHUE, CHARLES A  
2797 FIRST STREET  
#2003  
FORT MYERS, FL 33916 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: SHUE, CHARLES  
Address: 2797 FIRST STREET #2003  
City-St-Zip: FORT MYERS, FL 33916

Title: D ( ) Delete  
Name: JOHNS, ROBERT  
Address: 3217 PELICAN BLVD  
City-St-Zip: CAPE CORAL, FL 33914

Title: D ( ) Delete  
Name: DAVIS, ALLYN  
Address: 1519 SW 29TH TER  
City-St-Zip: CAPE CORAL, FL 33914

Title: S ( ) Delete  
Name: SCHNEIDER, LYNN  
Address: 602 SW 39TH TER  
City-St-Zip: CAPE CORAL, FL 33914

Title: C ( ) Delete  
Name: TRUITT, CURT  
Address: 5636 MONTILLA DRIVE  
City-St-Zip: FORT MYERS, FL 33919

Title: D ( ) Delete  
Name: STULTS, RICK  
Address: 3027 SE 5TH PLACE  
City-St-Zip: CAPE CORAL, FL 33904

**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: TURLEY, COMER  
Address: 1209 SW 18TH TER  
City-St-Zip: CAPE CORAL, FL 33991

Title: S (X) Change ( ) Addition  
Name: JENT, AVANNAH  
Address: 217 SE 10TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33990

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 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: CHARLES A. SHUE

D

04/20/2006

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

\_\_\_\_\_  
Date