

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09285

FILED
Feb 06, 2009
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: KUHN, JERRY
Address: 1909 SW 45TH LANE
City-St-Zip: CAPE CORAL, FL 33914

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

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

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

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

Title: D (X) Change () Addition
Name: RULLO, GARY
Address: 4225 SW 25TH COURT
City-St-Zip: CAPE CORAL, FL 33914

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: CHARLES A. SHUE

D

02/06/2009

Electronic Signature of Signing Officer or Director

Date