

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27385

FILED
Mar 11, 2008
Secretary of State

Entity Name: SAND LAKE CHRISTIAN ACADEMY, INC.

Current Principal Place of Business:

C/O CYNTHIA MASCARENIAS
5838 HOFFNER AVENUE
ORLANDO, FL 32822 US

New Principal Place of Business:

C/O CYNTHIA MASCARENIAS
7200 PERSHING AVENUE
ORLANDO, FL 32822 US

Current Mailing Address:

5838 HOFFNER AVE
ORLANDO, FL 32822 US

New Mailing Address:

C/O CYNTHIA MASCARENIAS
7200 PERSHING AVENUE
ORLANDO, FL 32822 US

FEI Number: 59-2900354

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAMBERS, DIANNE
1419 43RD STREET
ORLANDO, FL 32839 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: TD () Delete
Name: MASCARENHAS, FRANZ
Address: 7200 PERSHING AVE
City-St-Zip: ORLANDO, FL 32822

Title: PD () Delete
Name: MASCARENHAS, CYNTHIA
Address: 7200 PERSHING AVE
City-St-Zip: ORLANDO, FL 32822

Title: D () Delete
Name: MAXWELL, CHRISTOPHER
Address: 15 MEADOW DRIVE
City-St-Zip: ROYSTON, GA 30662

Title: D () Delete
Name: MAXWELL, DEBORAH
Address: 15 MEADOW DRIVE
City-St-Zip: ROYSTON, GA 30662

Title: D (X) Delete
Name: RICE, GARY
Address: 8859 WINDSOR POINTE DRIVE
City-St-Zip: ORLANDO, FL 32829

Title: D (X) Delete
Name: RICE, TAMMY
Address: 8859 WINDSOR POINTE DRIVE
City-St-Zip: ORLANDO, FL 32829

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
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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: CYNTHIA MASCARENHAS

PD

03/11/2008

Electronic Signature of Signing Officer or Director

Date