

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 10, 2006 8:00 am
Secretary of State

03-10-2006 90018 039 ****61.25

DOCUMENT # N31345

1. Entity Name

**SUWANNEE RIVER VALLEY CHRISTIAN ACADEMY
PRIVATE SCHOOL SYSTEM, INC.**



Principal Place of Business

Mailing Address

8149 SW COUNTRY RD
341
TRENTON FL 32693,
US

8149 SW COUNTRY RD
341
TRENTON FL 32693
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2905305

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MUCCIARONE, LIZ
904 SO MAIN ST
TRENTON FL 32693**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Liz Mucciarone

Liz Mucciarone

3/01/06

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME REED, RICK
STREET ADDRESS 4929 SW 35TH TRAIL
CITY-ST-ZIP BELL FL 32619

TITLE ☐ Delete
NAME MOTT, WILLIAM
STREET ADDRESS PO BOX 1427
CITY-ST-ZIP OLD TOWN FL 32680

TITLE ☒ Delete
NAME DAVIS, TINIA
STREET ADDRESS 5400 SW CR 341
CITY-ST-ZIP TRENTON FL 32693

TITLE ☐ Delete
NAME BROOM, JAMES
STREET ADDRESS 5920 SW CR 307
CITY-ST-ZIP TRENTON FL 32693

TITLE ☐ Delete
NAME WARD, LUTRENDIA
STREET ADDRESS HC-3 BOX 296
CITY-ST-ZIP OLD TOWN FL 32680

TITLE ☐ Delete
NAME Gonthier, Kim
STREET ADDRESS P.O. Box 334
CITY-ST-ZIP Bell, FL 32619

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Liz Mucciarone

Liz Mucciarone

3/01/06

(352) 463-1569