

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37019

Entity Name: HALLANDALE CHRISTIAN SCHOOL, INC.

FILED
Jun 15, 2004
Secretary of State

Current Principal Place of Business:

220 SW 6TH AVE
HALLANDALE, FL 330095322

New Principal Place of Business:

Current Mailing Address:

220 SW 6TH AVE
HALLANDALE, FL 330095322

New Mailing Address:

FEI Number: 65-0219498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'HARA, DOLORES
5821 NE 17 AVE
FT. LAUDERDALE, FL 33334 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: DP () Delete
Name: DESSIEUX, LUC
Address: 220 SW 6TH AVE
City-St-Zip: HALLANDALE, FL 330095322

Title: D () Delete
Name: THOMPSON, JUDY
Address: 220 SW 6TH AVE.
City-St-Zip: HALLANDALE, FL 33009

Title: DP () Delete
Name: OHARA, DEE
Address: 100 SE 2ND AVE
City-St-Zip: FT LAUDERDALE, FL

Title: D () Delete
Name: WELCH, ELEANOR
Address: 2414 NE 13 COURT
City-St-Zip: FT LAUDERDALE, FL

Title: D () Delete
Name: SMART, MARGARET
Address: 5081 SW 28 AVE
City-St-Zip: DANIA BEACH, FL

Title: D () Delete
Name: KING, DELBERT
Address: 118 SE 1ST AVE
City-St-Zip: DANIA BEACH, FL

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 for the exemption stated in Section 119.07(3)(i), 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: JUDY THOMPSON

DIRE

06/15/2004

Electronic Signature of Signing Officer or Director

Date