FILE NOW: FILING FEE IS \$61.25

Apr 30 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # N40992 (2) FREEDOM CHRISTIAN SCHOOLS, INC. Principal Place of Business Mailing Address FIRST BAPTIST CHURCH FIRST BAPTIST CHURCH 3. Date Incorporated or Qualified 202 FLAMINGO DRIVE APOLLO BEACH FL 33572 202 FLAMINGO DRIVE 11/26/1990 APOLLO BEACH FL 33572 4. FEI Number Applied For 59-3040915 Not Applicable 2. Principal Place of Business 2a. Mailing Address Ø \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #. etc. Suite. Apt. #. etc 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State 7. Is this nonprofit corporation a homeowners association? City & State 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name WYANT, KATHY A. Street Address (P.O. Box Number is Not Acceptable) 82 9409 BULLFROG COURT 83 **GIBSONTON FL 33534** 84 City 85 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when ministating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE **GROVES, NORMAN** NAME 1.2 NAME 202 FLAMINGO DR. . 1.3 STREET ADDRESS STREET ADDRESS APOLLO BEACH FL 33572 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME WYANT, WILSON E 2.2 NAME STREET ADDRESS 9409 BULLFROG COURT 2.3 STREET ADDRESS GIBSONTON FL 33534 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition Change TITLE 3.1 TITLE STONE, LAURA Z NAME 3.2 NAME 276 BROAD ST STREET ADDRESS 3.3 STREET ADDRESS MASARYKTOWN FL 34609 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.9 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

GNATURE:

Obuil 22 1998 626-6099

SIGNATURE:

FILED

Wil 22, 1998 626-6009