## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N44684

FILED Mar 13, 2009 Secretary of State

Entity Name: SUMMIT CHRISTIAN SCHOOL, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

9065 LIGON COURT

FORT MYERS, FL 33908 US

**Current Mailing Address: New Mailing Address:** 

9065 LIGON COURT

FORT MYERS, FL 33908 US

FEI Number: 65-0281587 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POLLIER, FRED 8917 DARTMOOR WAY FORT MYERS, FL 33908

US

() Delete

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:

Name:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

## **OFFICERS AND DIRECTORS:**

JACOBSEN, TIM

(X) Change ( ) Addition COURTWRIGHT, MARIEL Name: Address: 2079 BARKLEY LANE UNIT 21

3414 SW 7TH AVE Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: FORT MYERS, FL 33907

Title: Title: ( ) Delete () Change () Addition

Name: MUSE, JACKIE Name: Address: 12450 GATEWAY GREEN DR. Address: City-St-Zip: FORT MYERS, FL 33913 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

FLOWER, SARAH Name: KAMERER, SUSAN Name:

17595 OSPREY INLET COURT Address: 746 SW 5TH TERR Address: City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip: FORT MYERS, FL 33908

Title: ( ) Delete Title: () Change () Addition

Name: POLLIER, FRED Name: Address: 8917 DARTMOOR WAY Address: City-St-Zip: FORT MYERS, FL 33908 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: FRED POLLIER PT 03/13/2009