

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46135

FILED
Jan 11, 2008
Secretary of State

Entity Name: TALLAVANA CHRISTIAN SCHOOL, INC.

Current Principal Place of Business:

5840 HAVANA HWY
HAVANA, FL 32333 US

New Principal Place of Business:

Current Mailing Address:

5840 HAVANA HIGHWAY
HAVANA, FL 32333 US

New Mailing Address:

FEI Number: 59-3097271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUTLER, JOSEPH
5840 HAVANA HIGHWAY
HAVANA, FL 32333 US

Name and Address of New Registered Agent:

ROSS, WILLIAM
5840 HAVANA HIGHWAY
HAVANA, FL 32333 US

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: WILLIAM R. ROSS

01/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CUTLER, JOSEPH
Address: 702 TALLAVANA TRAIL
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: SALTERS, DEBRA
Address: 218 MOCCASIN CIR.
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: SCHERDIN, KAY
Address: 5840 HAVANA HWY.
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: KELLY, RICK
Address: 906 DOE RUN RD
City-St-Zip: HAVANA, FL 32333

Title: D () Delete
Name: BAKER, SANDY
Address: 221 HONEYSUCKLE DR
City-St-Zip: HAVANA, FL 32333

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROSS, WILLIAM
Address: 2660 FRANK SMITH RD
City-St-Zip: QUINCY, FL 32352

Title: D (X) Change () Addition
Name: SCOTT, WILLIAM
Address: 405 E. 6TH AVE.
City-St-Zip: HAVANA, FL 32333

Title: D (X) Change () Addition
Name: FREEMAN, GARY
Address: 5840 HAVANA HWY.
City-St-Zip: HAVANA, FL 32333

Title: D (X) Change () Addition
Name: SHEFFIELD, SKIP
Address: 5840 HAVANA HIGHWAY
City-St-Zip: HAVANA, FL 32333

Title: D (X) Change () Addition
Name: JONES, KATIE
Address: 707 COLLINS 1 ROAD
City-St-Zip: HAVANA, FL 32333

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: WILLIAM R. ROSS

PD

01/11/2008

Electronic Signature of Signing Officer or Director

Date