

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 18 PM 11:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N49114 (4)

1. Corporation Name

FRANKLIN CHRISTIAN ACADEMY, INC.

Principal Place of Business

Mailing Address

2908 BELL SHOALS RD
BRANDON FL 33511
US

2908 BELL SHOALS RD
BRANDON FL 33511
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/26/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3128048

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

Yes

No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALBAUGH, MITCHELL E.
921 S PARSONS AVE SUITE 3
BRANDON FL 33511

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Mitchell E. Albough

Mitchell E. Albough

4/9/95

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	T
NAME	ALBAUGH, MITCHELL E.
STREET ADDRESS	3810 SCOVILL LANE
CITY - ST - ZIP	VALRICO FL
TITLE	T
NAME	FRANKLIN, KENNETH W., SR
STREET ADDRESS	3903 BUTTERNUT COURT
CITY - ST - ZIP	BRANDON FL
TITLE	T
NAME	FRANKLIN, KENNETH W., JR
STREET ADDRESS	3809 CINNAMON TRACE. DR.
CITY - ST - ZIP	VALRICO FL
TITLE	T
NAME	HUMPHREY, J. PHILIP
STREET ADDRESS	1012 WINCHESTER COURT
CITY - ST - ZIP	BRANDON FL
TITLE	T
NAME	LARSEN, DALE R.
STREET ADDRESS	1202 THOMAS JACOBS PLACE
CITY - ST - ZIP	BRANDON FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

Mitchell E. Albough

Mitchell E. Albough, Trustee

4/9/95

813/624-2976

SIGNATURE AND TYPED OR PRINTED NAME OF AGING OFFICER OR DIRECTOR

(S)

Daytime Phone