

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49114

FILED
Jan 16, 2009
Secretary of State

Entity Name: FOUNDATION CHRISTIAN ACADEMY, INC.

Current Principal Place of Business:

3955 LITHIA PINECREST
VALRICO, FL 33594 US

New Principal Place of Business:

Current Mailing Address:

3955 LITHIA PINECREST
VALRICO, FL 33594 US

New Mailing Address:

FEI Number: 59-3128048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MADDOX, PEGGY
4715 DOVER CLIFF CT
DOVER, FL 33527 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: PT () Delete
Name: FRANKLIN, KENNETH W., JR
Address: 5841 AUDUBON MANOR BLVD
City-St-Zip: LITHIA, FL 33547

Title: VT () Delete
Name: HUDSON, ERNIE
Address: 1020 EMERALD CREEK DR
City-St-Zip: VALRICO, FL 33594

Title: T1 () Delete
Name: MADDOX, PEGGY
Address: 4715 DOVER CLIFF CT
City-St-Zip: DOVER, FL 33527

Title: S () Delete
Name: KEY, PAM
Address: 2603 PANKAW LN.
City-St-Zip: VALRICO, FL 33594

Title: T () Delete
Name: RICHARDSON, GARY
Address: 5008 MUIR WAY
City-St-Zip: LITHIA, FL 33547

Title: T () Delete
Name: SMITH, JONATHAN
Address: 10117 DEEPBROOK DR.
City-St-Zip: RIVERVIEW, FL 33569

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
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SOLANO, DANIEL
Address: 11227 RIVERVIEW DR.
City-St-Zip: RIVERVIEW, FL 33578

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: KENNETH W. FRANKLIN

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date