

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N51079** (4)

1. Corporation Name

R.J. HENDLEY CHRISTIAN EDUCATION CENTER, A PRIVATE SCHOOL, INC.



Principal Place of Business

**2760 AVENUE "R"
RIVIERA BEACH FL 33404**

Mailing Address

**2800 AVE. "R"
RIVIERA BCH. FL 33404**

3. Date Incorporated or Qualified
09/30/1992

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

55-0326220

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**

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



Yes



No

22

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23

City & State

City & State

24

Zip

Country

29

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LAWRENCE, SHAWNEE
4243 NORTHLAKE BLVD
STE B
PALM BCH GRDNS FL 33410**

81 Name

Shawnee S. Lawrence

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

1010 W 4th Street

83

84 City

Riviera Beach FL

85 Zip Code

33404

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

Shawnee Lawrence

(NOTE: Registered Agent signature required when reinstating)

March 13, 1996

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **HENDLEY, CASSANDRA A.**
STREET ADDRESS **426 9TH AVENUE**
CITY-ST-ZIP **VERO BEACH FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **LAWRENCE, SHAWNEE**
STREET ADDRESS **4993 LUQUI COURT**
CITY-ST-ZIP **W. PALM BEACH FL**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **1010 W. 4th Street**
2.4 CITY-ST-ZIP **Riviera Beach, FL 33404**

TITLE **TD** ☐ DELETE
NAME **JACKSON, JULIAN**
STREET ADDRESS **1206 SEA PINES LANE**
CITY-ST-ZIP **LANTANA FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **STUBBS, MARIAN**
STREET ADDRESS **8042 STREET JOHN AVE "E"**
CITY-ST-ZIP **BOYNTON BEACH FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **BUTLER, CLINTON**
STREET ADDRESS **1520 N. 24TH COURT**
CITY-ST-ZIP **RIVIERA BEACH FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **HENDLEY, REV. ROBERT J.**
STREET ADDRESS **1380 W. 30TH STREET**
CITY-ST-ZIP **RIVIERA BEACH FL**

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 119.07(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:

Shawnee Lawrence
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-13-96 407-848-0264
Date Daytime Phone #

CR2E037 (12/95)