2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 22, 2009
Secretary of State

DOCUMENT# N94000004140

Entity Name: LAKE CITY CHRISTIAN ACADEMY, INC.

Current Principal Place of Business:

3035 S.W. PINEMOUNT ROAD
LAKE CITY, FL 32024

New Principal Place of Business:

Current Mailing Address:

3035 S.W. PINEMOUNT ROAD
LAKE CITY, FL 32024

New Mailing Address:

FEI Number: 59-3273266 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NORRIS, TANA
2903 SW PINEMOUNT ROAD
LAKE CITY, FL 32024 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: PD ( ) Delete
Name: NORRIS, TANA
Address: 2903 SW PINEMOUNT RD
City-St-Zip: LAKE CITY, FL 32024

Title: VPDT ( ) Delete
Name: BROWN, AMY
Address: 259 NW RHODEN GLEN
City-St-Zip: LAKE CITY, FL 32055

Title: STD ( ) Delete
Name: DUCKETT, BARBARA W
Address: 2901 PINEMOUNT ROAD
City-St-Zip: LAKE CITY, FL 32024

Title: D ( ) Delete
Name: BEAULIEU, PETE
Address: 1756 SE CR. 245-A
City-St-Zip: LAKE CITY, FL 32025

Title: D ( ) Delete
Name: BASS, KAY
Address: HYW 441
City-St-Zip: LAKE CITY, FL 32055

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: D (X) Change ( ) Addition
Name: ESPENSHIP, KYLE G
Address: 2901 SW PINEMOUNT ROAD
City-St-Zip: LAKE CITY, FL 32024 US

Title: ( ) Change ( ) Addition
Name:
Address:
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: TANA NORRIS PD 10/22/2009

Electronic Signature of Signing Officer or Director — Date