

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004902

FILED  
Jan 07, 2007  
Secretary of State

Entity Name: SONSHINE CHRISTIAN ACADEMY, INC.

## Current Principal Place of Business:

1671 SW CROSSING CIRCLE  
PALM CITY, FL 34990 US

## New Principal Place of Business:

PO BOX 754  
STUART, FL 34995-075 US

## Current Mailing Address:

P.O. BOX 754  
STUART, FL 34995 US

## New Mailing Address:

P.O. BOX 754  
STUART, FL 34995-075 US

FEI Number: 65-0524778

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MILLER, JILL  
1281 SW FAST ST  
PALM CITY, FL 34990 US

## Name and Address of New Registered Agent:

MOORE, EDWARD J JR.  
1319 NW FORK ROAD  
STUART, FL 34994 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: EDWARD J MOORE JR

01/07/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DV ( ) Delete  
Name: FENTON, DONNA  
Address: 1700 SW BELGRAVE TERRACE  
City-St-Zip: STUART, FL 34997

Title: DS ( ) Delete  
Name: MARTIAN, ALLANA  
Address: 8696 SE LYONS RD  
City-St-Zip: HOBE SOUND, FL 33455

Title: DT ( ) Delete  
Name: MILLER, JILL  
Address: 1281 SW FAST ST  
City-St-Zip: PALM CITY, FL 34990

Title: DP ( ) Delete  
Name: PRICE, CLYDE  
Address: 1671 SW CROSSING CIRCLE  
City-St-Zip: PALM CITY, FL 34990

Title: D ( ) Delete  
Name: JACKSON, KRISTINE  
Address: 1271 SW EVERGREEN LANE  
City-St-Zip: PALM CITY, FL 34990

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DT (X) Change ( ) Addition  
Name: MOORE, EDWARD J JR.  
Address: 1319 NW FORK ROAD  
City-St-Zip: STUART, FL 34994

Title: DP (X) Change ( ) Addition  
Name: MILLER, JILL  
Address: 1281 SW FAST STREET  
City-St-Zip: PALM CITY, FL 34990

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

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD J MOORE JR

DT

01/07/2007

Electronic Signature of Signing Officer or Director

Date