# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 29, 2006**
**Secretary of State**

DOCUMENT# N94000005725

**Entity Name:** CORNERSTONE CHRISTIAN ACADEMY INCORPORATED

**Current Principal Place of Business:**

20201 SW 117 AVE
MIAMI, FL 33177

**New Principal Place of Business:**

**Current Mailing Address:**

20201 SW 117 AVE
MIAMI, FL 33177

**New Mailing Address:**

**FEI Number: 65-0544344** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CROWTHER, ELIZABETH F
20201 SW 117 AVE
MIAMI, FL 33177 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: D ( ) Delete
Name: CROWTHER, ELIZABETH F
Address: 20201 SW 117 AVE
City-St-Zip: MIAMI, FL 33177

Title: D ( ) Delete
Name: BEALL, MARTIN REV.
Address: 12715 SW 119 TERR
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete
Name: CROWTHER, DAVID C
Address: 2586 CENTERGATE DR APT 306
City-St-Zip: MIRAMAR, FL 33025

Title: D ( ) Delete
Name: CROWTHER, WILLIAM P
Address: 20201 SW 117 AVE
City-St-Zip: MIAMI, FL 33177

**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:

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: WILLIAM P CROWTHER D 04/29/2006

Electronic Signature of Signing Officer or Director Date