

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002584

FILED
Apr 29, 2010
Secretary of State

Entity Name: ROSA/MARIA CHRISTIAN TEACHING CENTER, INC.

Current Principal Place of Business:

2817 BARDSWOOD LANE
TALLAHASSEE, FL 32305

New Principal Place of Business:

Current Mailing Address:

2817 BARDSWOOD LANE
TALLAHASSEE, FL 32305

New Mailing Address:

FEI Number: 59-3174830

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, SHADRICK L
2817 BARDSWOOD LANE
TALLAHASSEE, FL 32310 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
Name: WALKER, SHADRICK L
Address: 2817 BARDSWOOD LANE
City-St-Zip: TALLAHASSEE, FL 32310

Title: D
Name: WALKER, SYLVIA L
Address: 2817 BARDSWOOD LANE
City-St-Zip: TALLAHASSEE, FL 32310

Title: D
Name: GEORGE, DOROTHY
Address: 1035 OLD SHELL POINT RD.
City-St-Zip: TALLAHASSEE, FL 32310

Title: D
Name: RAINS, YVONNE
Address: 8631 WIDE ROAD
City-St-Zip: TALLAHASSEE, FL 32310

Title: D
Name: COHEN, JAMES
Address: 138 HUTCHINSON STREET
City-St-Zip: TALLAHASSEE, FL

Title: D
Name: COHEN, JULIA
Address: 1338 HUTCHINSON STREET
City-St-Zip: TALLAHASSEE, FL

I hereby 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 all other like empowered.

SIGNATURE: SHADRICK L. WALKER

D

04/29/2010

Electronic Signature of Signing Officer or Director

Date