

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005406

FILED
Aug 16, 2005
Secretary of State

Entity Name: PALMETTO CHRISTIAN SCHOOL, INC.

Current Principal Place of Business:

1401 14TH AVENUE, W
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

1401 14TH AVENUE, W
PALMETTO, FL 34221

New Mailing Address:

FEI Number: 59-2770897 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MATHEWS, TALMADGE L
1401 14TH AVENUE, W
PALMETTO, FL 34221 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MATHEWS, TALMADGE L
Address: 1401 14TH AVENUE, W
City-St-Zip: PALMETTO, FL 34221

Title: SD () Delete
Name: MATHEWS, RUTH F
Address: 1401 14TH AVENUE, W
City-St-Zip: PALMETTO, FL 34221

Title: VPD () Delete
Name: BUSTLE, BRIAN
Address: 1507 - 20TH AVE WEST
City-St-Zip: PALMETTO, FL 34221

Title: TD () Delete
Name: ARNOLD, THELMA
Address: 6505 HWY 301 NORTH LOT B-10
City-St-Zip: ELLENTON, FL 342222

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 Section 119.07(3)(i), 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: BRIAN BUSTLE

VPD

08/16/2005

Electronic Signature of Signing Officer or Director

Date