

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000005427

**FILED**  
**Feb 18, 2004**  
**Secretary of State****Entity Name:** TLC CHRISTIAN ACADEMY, INC.**Current Principal Place of Business:**111-115 SW 10TH AVE  
DELRAY BEACH, FL 33444 US**New Principal Place of Business:****Current Mailing Address:**111-115 SW 10TH AVE  
DELRAY BEACH, FL 33444 US**New Mailing Address:****FEI Number:** 65-0704760**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**OWENS, QUEEN  
328 NW 2ND AVE  
DELRAY BEACH, FL 33444 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:** OWENS, QUEEN E  
**Address:** 328 NW 2ND AVE  
**City-St-Zip:** DELRAY BEACH, FL 33444**Title:** SD ( ) Delete  
**Name:** OWENS, THOMAS  
**Address:** 222 SW 2ND AVE  
**City-St-Zip:** DELRAY BEACH, FL 33444**Title:** TD ( ) Delete  
**Name:** HARRIS, TEQUILLA D  
**Address:** 1100 SW 4TH AVENUE  
**City-St-Zip:** DELRAY BEACH, FL 33444**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** TD (X) Change ( ) Addition  
**Name:** HARRIS, TEQUILLA D  
**Address:** 328 NW 2ND AVENUE  
**City-St-Zip:** DELRAY BEACH, FL 33444

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: TEQUILLA D HARRIS

TD

02/18/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date