

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001727

FILED
Jan 23, 2008
Secretary of State

Entity Name: SUNCOAST CHRISTIAN ACADEMY, INC.

Current Principal Place of Business:

5561 HYPOLUXO ROAD
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

5561 HYPOLUXO ROAD
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 65-0787861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOCKETT, DORIS
6025 WEDGEWOOD VILLAGE CIRCLE
LAKE WORTH, FL 33463 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: WHITE, MICHAEL
Address: 7740 WEST LAKE DR.
City-St-Zip: WEST PALM BEACH, FL 33406

Title: TD () Delete
Name: METZKES, PAUL
Address: 3750 COELEBS AVE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: VD () Delete
Name: GOSA, RAY
Address: 3757 SATIN LEAF CT
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: MORAKIS, MICHAEL
Address: 5587 1ST ROAD
City-St-Zip: LAKE WORTH, FL 33463

Title: SD () Delete
Name: LERRO, JUDY
Address: 6565 MONNOUTH RD
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D () Delete
Name: GATLIN, DERWIN
Address: 5316 SANCERRE CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: DEEM, TIM
Address: 12487 SAWGRASS CT.
City-St-Zip: WELLINGTON, FL 33414

Title: VD (X) Change () Addition
Name: MORAKIS, MICHAEL
Address: 5587 1ST ROAD
City-St-Zip: LAKE WORTH, FL 33463

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 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: MICHAEL E. WHITE

PD

01/23/2008

Electronic Signature of Signing Officer or Director

Date