

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001727

FILED  
Feb 16, 2010  
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 ( )

**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: D  
Name: WHITE, MICHAEL  
Address: 7740 WEST LAKE DR.  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: PTD  
Name: METZKES, PAUL  
Address: 3750 COELEBS AVE  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D  
Name: DOZIER, MARVIN  
Address: 7329 SMITHBROOK DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

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

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

Title: D  
Name: GATLIN, KEVIN  
Address: 255 LAKE ARBOR DRIVE  
City-St-Zip: PALM SPRINGS, FL 33461

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: PAUL METZKES

PTD

02/16/2010

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

\_\_\_\_\_  
Date