

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004688

FILED  
Apr 29, 2005  
Secretary of State

**Entity Name:** HERITAGE CHRISTIAN SCHOOL CORPORATION

**Current Principal Place of Business:**

891 COPLY ST SE  
PALM BAY, FL 32909

**New Principal Place of Business:**

**Current Mailing Address:**

891 COPLY ST SE  
PALM BAY, FL 32909

**New Mailing Address:**

**FEI Number:** 59-3436210

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ERZINGER, RENEE  
1385 WHALING AVENUE SOUTHEAST  
PALM BAY, FL 32909 US

**Name and Address of New Registered Agent:**

L'ALLIER, ELIZABETH M  
3020 YUKON COURT  
MELBOURNE, FL 32935 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: ELIZABETH M. L'ALLIER

04/29/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: AD ( ) Delete  
Name: ERZINGER, RENEE  
Address: 1385 WHALING AVENUE SOUTHEAST  
City-St-Zip: PALM BAY, FL 32909

Title: SD ( ) Delete  
Name: LALLIER, ELIZABETH  
Address: 3020 YUKON CT  
City-St-Zip: MELBOURNE, FL 32935

Title: D ( ) Delete  
Name: GROGAN, ELLEN  
Address: 2435 GRASSMERE DR  
City-St-Zip: MELBOURNE, FL 32904

**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:

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: ELIZABETH M. L'ALLIER

SD

04/29/2005

Electronic Signature of Signing Officer or Director

Date