

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 09, 2008 8:00 am**  
**Secretary of State**

04-09-2008 90020 038 \*\*\*\*70.00

**DOCUMENT # N97000005624**

1. Entity Name

CHRISTIAN LOVE FELLOWSHIP ACADEMY, INC.



Principal Place of Business

747 S. FEDERAL HIGHWAY  
DEERFIELD BEACH FL 33441

Mailing Address

747 S. FEDERAL HIGHWAY  
DEERFIELD BEACH FL 33441



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0807807

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

1st MOORE

CR2E037 (10/07)

6. Name and Address of Current Registered Agent

GUADAGNINO, ANTHONY  
4029 EASTRIDGE CIRCLE  
POMPANO BEACH FL 33064

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent Signature required when registering)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE D  
NAME GUADAGNINO, BEATRICE ☐ Delete  
STREET ADDRESS 1081 SW 19 ST.  
CITY-ST-ZIP BOCA RATON FL 33486

TITLE DS  
NAME DRABIK, MARY A ☐ Delete  
STREET ADDRESS 738 SE 10 TERR.  
CITY-ST-ZIP DEERFIELD BEACH FL 33441

TITLE P  
NAME GUADAGNINO, ANTHONY ☐ Delete  
STREET ADDRESS 4029 EASTRIDGE CIR  
CITY-ST-ZIP POMPANO BEACH FL 33064

TITLE D  
NAME RECKLEY, JUANITA ☐ Delete  
STREET ADDRESS 1311 SW 9TH AVE  
CITY-ST-ZIP DEERFIELD BEACH FL 33441

TITLE D ☒ Delete  
NAME BRANCH, JOSEPHINE  
STREET ADDRESS 333 NE 34 STREET  
CITY-ST-ZIP OAKLAND PARK FL 33334

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition  
NAME Nero, Jamie  
STREET ADDRESS 608 NE 2nd Ave  
CITY-ST-ZIP Deerfield Beach, FL 33441

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*

3-12-08

954.428-8580