


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

**FILED**  
**Apr 30, 2004 8:00 am**  
**Secretary of State**

04-30-2004 90392 015 \*\*\*\*61.25

**DOCUMENT # N98000001588**

1. Entity Name  
**FAMILY LIFE COMMUNITY SCHOOL, INC.**



Principal Place of Business  
 1616 59TH ST. W.  
 BRADENTON, FL 34209

Mailing Address  
 1616 59TH ST. W.  
 BRADENTON, FL 34209

11091100



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

02062004 Chg-NP CR2E037 (10/03)

City & State  
 Zip Country

4. FEI Number  
 65-0822381

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

HAMILTON, W. SCOTT ESQ.  
 2400 MANATEE AVE W  
 BRADENTON, FL 34205

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2004**

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	P	<input type="checkbox"/> Delete
NAME	HAMILTON, W S ESQ	
STREET ADDRESS	2400 MANATEE AVE W	
CITY-ST-ZIP	BRADENTON, FL 34205	
TITLE	T	<input type="checkbox"/> Delete
NAME	WHALEY, BRUCE	
STREET ADDRESS	1616 59TH ST W	
CITY-ST-ZIP	BRADENTON, FL 84209	
TITLE	D	<input type="checkbox"/> Delete
NAME	WHALEY, LISA	
STREET ADDRESS	1616 59TH ST W	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE	VP	<input type="checkbox"/> Delete
NAME	KOMAROV, LOU	
STREET ADDRESS	3402 47TH AVE E	
CITY-ST-ZIP	BRADENTON, FL 34203	
TITLE	D	<input type="checkbox"/> Delete
NAME	KOMAROV, CHERIE	
STREET ADDRESS	3402 47TH AVE E	
CITY-ST-ZIP	BRADENTON, FL 34203	
TITLE	D	<input type="checkbox"/> Delete
NAME	HAMILTON, JEANNE	
STREET ADDRESS	1616 57TH ST W	
CITY-ST-ZIP	BRADENTON, FL 34209	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHN THOMAS	
STREET ADDRESS	1616 59TH ST. W.	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Bruce Whaley, Bruce Whaley 4/27/04 841-747-4483

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #