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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

482981 - 90164 - 44

DOCUMENT # **N98000001777**

1. Corporation Name
HAINES CITY CHRISTIAN ACADEMY, INC.

Principal Place of Business	Mailing Address
1232 ROBINSON DRIVE HAINES CITY FL 33844	1232 ROBINSON DRIVE HAINES CITY FL 33844

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 03/25/1998
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-3559603 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

CARTER, JOHN B JR
2637 JB CARTER ROAD
DAVENPORT FL 33837

10. Name and Address of New Registered Agent

81 Name LARRY WILLIS
82 Street Address (P.O. Box Number is Not Acceptable) 39 TENTH ST. NORTH
83
84 City HAINES CITY **FL** 85 Zip Code 33844

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE J. B. Carter Jr Larry D. Willis 4/28/99 4/27/99
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres. JOHN B. CARTER JR ☒ DELETE 2637 J.B. CARTER Rd DAVENPORT, FLA. 33837	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PRESIDENT/D GENE ELLMORE 283 BAYSHORE DRIVE AUBURNDALE, FL 33823	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VP/D HILTON SUMMERS 109 HIGH ST WINTER HAVEN, FL 33880	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	SD DANNY GARNER 1720 TIERRA ALTA DR LAKELAND, FL 33813	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	TD BILL THORNHILL 905 AVE T SE WINTER HAVEN, FL 33880	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	2VP (SECOND VICE PRESIDENT JIM THORNHILL 3205 HOLLY HILL GROVE RD 3 DAVENPORT, FL 33837	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/98)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. B. Carter Jr PRESIDENT John B. Carter, JR 4/21/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #