

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005255

FILED
Aug 31, 2007
Secretary of State

Entity Name: NEW HORIZON CHRISTIAN ACADEMY, INC.

Current Principal Place of Business:

207 FORD AVENUE
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

207 FORD AVENUE
JACKSONVILLE, FL 32218

New Mailing Address:

11226 DUVAL ROAD
JACKSONVILLE, FL 32218

FEI Number: 59-3531775 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LAWSON, DAVE PH.D.
207 FORD AVENUE
JACKSONVILLE, FL 32218 US

Name and Address of New Registered Agent:

RINER, CRYSTAL
207 FORD AVENUE
JACKSONVILLE, FL 32218 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: CRYSTAL H RINER

08/31/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RINER, THOMAS WADE JR.
Address: 11226 DUVAL ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: CH () Delete
Name: RINER, CRYSTAL H
Address: 11226 DUVAL RD.
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: WILLIAMS, DR. ARLO
Address: 9648 WOODLAND AVE.
City-St-Zip: JACKSONVILLE, FL 32208

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 exemption stated in Chapter 119, 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: CRYSTAL H RINER

CH

08/31/2007

Electronic Signature of Signing Officer or Director

Date