

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006467

FILED
May 03, 2009
Secretary of State

Entity Name: PASCO CHRISTIAN HOMESCHOOL ASSOCIATION, INC.

Current Principal Place of Business:

6219 RIVER RD. NW
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3085
HOLIDAY, FL 34690

New Mailing Address:

FEI Number: 59-3580274 **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:

Name and Address of New Registered Agent:

FRANEK, ANDY
4933 MARLIN DR.
NEW PORT RICHEY, FL 34652 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FRANEK, ANDY
Address: 4933 MARLIN DR.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: CD () Delete
Name: FRANEK, DEBBIE
Address: 4933 MARLIN DR.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: T () Delete
Name: FRANEK, ANDY
Address: 4933 MARLIN DR.
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: S () Delete
Name: PELLEY, PERRI
Address: 5037 POSTELL DR.
City-St-Zip: HOLIDAY, FL 34690

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:

Title: S (X) Change () Addition
Name: THURMAN, CAREY
Address: 9923 MENDEL DR.
City-St-Zip: NEW PORT RICHEY, FL 34654

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: CAREY THURMAN

S

05/03/2009

Electronic Signature of Signing Officer or Director

Date