2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006927

Entity Name: LOGOS CHRISTIAN ACADEMY, INC.

FILED May 02, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

828 E 7TH AVE MT DORA, FL 32757

Current Mailing Address: New Mailing Address:

PO BOX 1145 23950 SE HWY 42 SORRENTO, FL 32776 UMATILLA, FL 32784

FEI Number: 59-3562298 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:

 HAIR, ROBERT D C.P.A.
 HAIR, ROBERT D C.P.A.

 828 EAST 7TH AVENUE
 23950 SE HWY 42

 MT DORA, FL 32757 US
 UMATILLA, FL 32784 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: 05/02/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: HAIR, ROBERT D Name: HAIR, TAMMY P

 Address:
 828 EAST 7TH AVE.
 Address:
 23950 SE HWY 42

 City-St-Zip:
 MT DORA, FL 32757
 City-St-Zip: UMATILLA, FL 32784

Title: SAD () Delete Title: SAD (X) Change () Addition Name: HAIR, TAMMY Name: BEARY, REBEKAH

Address: 828 EAST 7TH AVE. Address: 24 OAK HOLLOW DRIVE
City-St-Zip: MT DORA, FL 32757 City-St-Zip: APOPKA, FL 32712

Title: ABD () Delete Title: ABD (X) Change () Addition
Name: PEARSON, LARRY REVEREN Name: PEARSON, LARRY REVEREN
Address: P.O. BOX 168 Address: 20113 SW 82ND PLACE

 Address:
 P.O. BOX 168
 Address:
 20113 SW 82ND PLACE

 City-St-Zip:
 MCINTOSH, FL 32664
 City-St-Zip:
 DUNNELLON, FL 34431

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: TAMMY P. HAIR PD 05/02/2007