

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005235

FILED  
Apr 24, 2009  
Secretary of State

**Entity Name:** SOUTHERN ASSOCIATION OF PRIVATE CHRISTIAN SCHOOLS, INC.

**Current Principal Place of Business:**

5836 CALUMET COURT  
CRESTVIEW, FL 32536

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 672  
NICEVILLE, FL 32588

**New Mailing Address:**

P.O. BOX 295  
CRESTVIEW, FL 32536

**FEI Number:** 59-3714620

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHATTERTON, DOROTHY  
5836 CALUMET CT  
CRESTVIEW, FL 32536 US

**Name and Address of New Registered Agent:**

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: D ( ) Delete  
Name: CHATTERTON, DOROTHY  
Address: 5836 CALUMET CT  
City-St-Zip: CRESTVIEW, FL 32536

Title: D ( ) Delete  
Name: RAMSEY, DEIDRE  
Address: 408 WOODLAWN CIRCLE  
City-St-Zip: LUFKIN, TX 75904

Title: D ( ) Delete  
Name: MICHAELS, BETH  
Address: 3443 ICE TEA RD B  
City-St-Zip: VERNON, FL 32462

**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: DOROTHY CHATTERTON

D

04/24/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date