

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005309

FILED  
Mar 04, 2010  
Secretary of State

**Entity Name:** BLESSED STAR CHRISTIAN SCHOOL, INC.

**Current Principal Place of Business:**

9151 N. DAVIS HWY  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

9801 BRIDGEWOOD LANE  
PENSACOLA, FL 32514

**New Mailing Address:**

**FEI Number:** 59-3596843

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHEN, OLIVIA  
9801 BRIDGEWOOD LANE  
PENSACOLA, FL 32514 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:** PS  
**Name:** CHEN, OLIVIA  
**Address:** 9801 BRIDGEWOOD LANE  
**City-St-Zip:** PENSACOLA, FL 32514

**Title:** VPT  
**Name:** CHEN, THOMAS  
**Address:** 9801 BRIDGEWOOD LANE  
**City-St-Zip:** PENSACOLA, FL 32514

**Title:** D  
**Name:** CHEN, GARRY  
**Address:** 106 BRIARWOOD DR.  
**City-St-Zip:** ITHACA, NY 14850

**Title:** D  
**Name:** HUDSON, EVELYN SUZANNE  
**Address:** 4351 BURTON WARD DR.  
**City-St-Zip:** PENSACOLA, FL 32514

**Title:** D  
**Name:** HINRICHS, VICKY  
**Address:** 8804 BURNING TREE RD  
**City-St-Zip:** PENSACOLA, FL 32514

I hereby 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 all other like empowered.

**SIGNATURE:** OLIVIA CHEN

PS

03/04/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date