

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000006341

**Entity Name:** CAMBRIDGE CHRISTIAN SCHOOL, INC.

**Current Principal Place of Business:**

6101 N HABANA AVE  
TAMPA, FL 33614

**Current Mailing Address:**

6101 N HABANA AVE  
TAMPA, FL 33614

**FEI Number:** 59-3698938

**Certificate of Status Desired:** No

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

MINKS, SHAWN  
6101 N HABANA AVE  
TAMPA, FL 33614 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:** SHAWN MINKS

02/06/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TRUSTEE, SECRETARY  
Name CONNER, STEWART  
Address 6101 N HABANA AVENUE  
City-State-Zip: TAMPA FL 33614

Title OFFICER, CFO  
Name TURK, LIANA M  
Address 6101 N HABANA AVE  
City-State-Zip: TAMPA FL 33614

Title TRUSTEE, TREASURER  
Name FARIS, MARK  
Address 6101 N HABANA AVE  
City-State-Zip: TAMPA FL 33614

Title TRUSTEE, VC  
Name REY, AMY  
Address 6101 N HABANA AVE  
City-State-Zip: TAMPA FL 33614

Title TRUSTEE, CHAIRMAN  
Name EDMONSON, KEVIN  
Address 6101 N HABANA AVE  
City-State-Zip: TAMPA FL 33614

*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:** LIANA TURK

**BUSINESS  
ADMINISTRATOR**

02/06/2017

Electronic Signature of Signing Officer/Director Detail

Date