

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000006133

**Entity Name:** FIELDS OF ART CHRISTIAN ACADEMY, INC.**Current Principal Place of Business:**203 WEST 48TH ST STE # 10  
JACKSONVILLE, FL 32218**Current Mailing Address:**11647 HARTS RD  
JACKSONVILLE, FL 32218 US**FEI Number:** 54-2071192**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VASSELL, RICARDO  
11647 HARTS RD  
JACKSONVILLE, FL 32218 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:** RICARDO VASSELL

03/17/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD
Name	HENDERSON, GALYNDA
Address	11647 HARTS ROAD
City-State-Zip:	JACKSONVILLE FL 32218

Title	VP
Name	HENDERSON, DONALD
Address	11647 HARTS ROAD
City-State-Zip:	JACKSONVILLE FL 32218

Title	STD
Name	VASSELL, RICARDO
Address	11647 HARTS RD
City-State-Zip:	JACKSONVILLE FL 32218

Title	DIRECTOR
Name	JACKSON, DENISE
Address	11647 HARTS RD
City-State-Zip:	JACKSONVILLE FL 32218

Title	DIRECTOR
Name	HENDERSON, DAWN V
Address	11647 HARTS RD.
City-State-Zip:	JACKSONVILLE FL 32218

*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:** DONALD HENDERSON

VP

03/17/2021

Electronic Signature of Signing Officer/Director Detail

Date