

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000002000

**Entity Name:** CLASSICAL CHRISTIAN ACADEMY, INC.**Current Principal Place of Business:**7101 BAYSHORE RD.  
N FORT MYERS, FL 33917-3303**Current Mailing Address:**7101 BAYSHORE ROAD  
N FORT MYERS, FL 33917-3303 US**FEI Number:** 20-0814739**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DAVIS, AMY J  
2651 AMBER LAKE DRIVE  
CAPE CORAL, FL 33909 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, CEO  
Name DAVIS, AMY J.  
Address 2651 AMBER LAKE DRIVE  
City-State-Zip: CAPE CORAL FL 33909

Title DIRECTOR, PRESIDENT  
Name BRIGGS, RAYMOND A.  
Address 29352 PONTICO ST  
City-State-Zip: PUNTA GORDA FL 33982

Title DIRECTOR, TREASURER  
Name HUTCHCRAFT, MICHELLE R.  
Address 6600 BRIARCLIFF ROAD  
City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR  
Name SCOTT, JODIE L.  
Address 2476 ZOYSIA LANE  
City-State-Zip: NORTH FORT MYERS FL 33917-3303

Title DIRECTOR  
Name NORMAN, DOUGLAS R.  
Address 2132 S. E. 8TH PLACE  
City-State-Zip: CAPE CORAL FL 33990

Title DIRECTOR, SECRETARY  
Name DRISKELL, KELLY  
Address 3557 MALGROTTA CIRCLE  
City-State-Zip: CAPE CORAL FL 33909

Title DIRECTOR  
Name VAN HELDEN, WILLIAM  
Address 17475 TALLULAH FALLS ROAD  
City-State-Zip: NORTH FORT MYERS FL 33917-3303

*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:** AMY J. DAVIS

CEO

04/06/2015

Electronic Signature of Signing Officer/Director Detail

Date