

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000009655

Entity Name: TAPESTRY CHRISTIAN COLLEGE AND ACADEMY INC**Current Principal Place of Business:**1260 S. COURTENAY PARKWAY
MERRITT ISLAND, FL 32952**Current Mailing Address:**1260 S. COURTENAY PARKWAY
MERRITT ISLAND, FL 32952**FEI Number:** 82-3555065**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SEMINARY COVENANT COMMUNITY, INC
1773 PINWOOD RD
MELBOURNE, FL 32934 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	P, D
Name	ROSBURY, PAUL H
Address	1773 PINWOOD RD
City-State-Zip:	MELBOURNE FL 32934

Title	D, ADMINISTRATOR
Name	BORST, DAVID
Address	3137 LADEN RD
City-State-Zip:	MELBOURNE FL 32935

Title	DIRECTOR
Name	BELL, DWIGHT
Address	420 S. BABCOCK
City-State-Zip:	MELBOURNE FL 32901

Title	D, PROVOST
Name	BRADFORD, DAVID G
Address	3415 SAVANNAHS TRAIL
City-State-Zip:	MERRITT ISLAND FL 32953

Title	DIRECTOR
Name	FINK, KERRY
Address	403 SEAHORSE CIRCLE
City-State-Zip:	PALM BAY FL 32909

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: PAUL ROSBURY**PRESIDENT****03/24/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date