

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G86846

**FILED**  
**Apr 10, 2008**  
**Secretary of State**

**Entity Name:** OAK ARBOR CHRISTIAN SCHOOL & CHILD CARE, INC.

**Current Principal Place of Business:**

1902 LONGWOOD-LAKE MARY ROAD  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

1902 LONGWOOD-LAKE MARY ROAD  
LONGWOOD, FL 32750

**New Mailing Address:**

**FEI Number:** 59-2391867

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PANGLE, MELINDA  
109 MOUND ST.  
LONGWOOD, FL 32750 US

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

NOYES, TONYA COTTAM  
301 FERDINAND DR.  
LONGWOOD, FL 32750 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: TONYA COTTAM NOYES

04/10/2008

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: PANGLE, MELINDA S,  
Address: 109 MOUND ST.  
City-St-Zip: LONGWOOD, FL

Title: VS ( ) Delete  
Name: NOYES-COTTAM, TONYA  
Address: 301 FERDINAND DR.  
City-St-Zip: LONGWOOD, FL 32750

Title: S ( ) Delete  
Name: HEISELMAN, JENNI  
Address: 537 RIDGELINE RUN  
City-St-Zip: LONGWOOD, FL 32750

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition  
Name: NOYES, TONYA COTTAM,  
Address: 301 FERDINAND DR.  
City-St-Zip: LONGWOOD, FL 32750

Title: VS (X) Change ( ) Addition  
Name: HEISELMAN, JENNI  
Address: 537 RIDGELINE RUN  
City-St-Zip: LONGWOOD, FL 32750

Title: S&TR (X) Change ( ) Addition  
Name: POOLE, TAMARA  
Address: 115 CARMEL BAT DR.  
City-St-Zip: SANFORD, FL 32771

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TONYA COTTAM NOYES

PRES

04/10/2008

Electronic Signature of Signing Officer or Director

Date