## 2002 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT# 707614** 

Entity Name: SAINT EDWARD'S SCHOOL, INCORPORATED

FILED Jan 04, 2002 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	TEDWARDS E CH, FL 32963				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	TEDWARDS E CH, FL 32963				
FEI Number:	59-1059214	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New				of New Registered Agent:	
GREENE, 1 550 CAMEL VERO BEA		US	GREENE, NANCY N 550 CAMELIA LANE VERO BEACH, FL		
The above in the State	named entity s of Florida.	ubmits this statement for the pu	rpose of changing its registe	red office or registered agent, or both,	
SIGNATUR	RE: NANCY N.	GREENE		01/04/2002	
	Electroni	Signature of Registered Agen	t	Date	
OFFICERS	AND DIRECT	ORS:	ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S () HOPKINS, SUSA 1580 GRACEWO VERO BEACH, F	OOD LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T () MULHOLLAND, VERO BEACH, F	WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	C () TEEL, DR. D G. 919 LADYBUG L VERO BCH, FL	Delete ANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VC () I WILLIAMS, AND 616 AZALEA LAN VERO BCH, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () DOWNEY, GREG 990 PAINTED BU VERO BEACH, F	INTING LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () I ROSS, ELIZABE 1310 LITTLE HA VERO BEACH, F	RBOUR DRIVE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW W. WILLIAMS C 01/04/2002