

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006362

FILED  
Jan 10, 2007  
Secretary of State

Entity Name: THE CANTERBURY SCHOOL OF FLORIDA FOUNDATION, INC.

**Current Principal Place of Business:**

901 58TH AVENUE NE  
ST PETERSBURG, FL 337031697

**New Principal Place of Business:**

990 62ND AVENUE NE  
ST PETERSBURG, FL 33702

**Current Mailing Address:**

901 58TH AVENUE NE  
ST PETERSBURG, FL 337031697

**New Mailing Address:**

990 62ND AVENUE NE  
ST PETERSBURG, FL 33702

FEI Number: 59-3533962

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HALL, MAC H  
901 58TH AVENUE NE  
SAINT PETERSBURG, FL 33703 US

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

HALL, MAC H  
990 62ND AVENUE NE  
SAINT PETERSBURG, FL 33702 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:

01/10/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCQUEEN, WILLIAM B  
Address: 2201 9TH STREET NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: V ( ) Delete  
Name: GILES, JOEL B  
Address: 200 CENTRAL AVENUE STE 2300  
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: T ( ) Delete  
Name: HANNA, SUSAN C  
Address: 902 MARCO DRIVE NE  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: D ( ) Delete  
Name: DOBIESZ, MAUREEN D  
Address: 739 GALEON DRIVE  
City-St-Zip: TIERRA VERDE, FL 33715

Title: S ( ) Delete  
Name: UPDEGRAFF, ELIZABETH  
Address: 1833 BRIGHTWATERS BLVD NE  
City-St-Zip: SAINT PETERSBURG, FL 33704

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: BRODY, SUE G  
Address: 701 6TH STREET S  
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BILL MCQUEEN

P

01/10/2007

Electronic Signature of Signing Officer or Director

Date