

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 701407

FILED
Aug 16, 2002
Secretary of State

Entity Name: SAN JOSE EPISCOPAL DAY SCHOOL FOUNDATION, INC.

Current Principal Place of Business:

7423 SAN JOSE BLVD
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

7423 SAN JOSE BLVD
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 23-7230023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NIMNIGHT, LEE
7423 SAN JOSE BLVD.
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FOSTER, RON,
Address: 11960 LITTLE CREEK LANE
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: NIMNIGHT, LEE
Address: 1141 PEACHTREE ST.
City-St-Zip: JACKSONVILLE, FL

Title: D (X) Delete
Name: WRENN, SYLVIA
Address: 1037 SORRENTO RD.
City-St-Zip: JACKSONVILLE, FL

Title: O () Delete
Name: KEISTER, J
Address: 2900 HARTLEY RD
City-St-Zip: JAX, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: NIMNIGHT, LEE A
Address: 1141 PEACHTREE ST.
City-St-Zip: JACKSONVILLE, FL

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

Title: D (X) Change () Addition
Name: KEISTER, J
Address: 2900 HARTLEY RD
City-St-Zip: JAX, FL 32257

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: LEE A NIMNIGHT

D

08/16/2002

Electronic Signature of Signing Officer or Director

Date