

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702692

FILED
Apr 08, 2009
Secretary of State

Entity Name: SAINT ANDREW'S SCHOOL OF BOCA RATON, INC.

Current Principal Place of Business:

3900 JOG ROAD
BOCA RATON, FL 33434 US

New Principal Place of Business:

Current Mailing Address:

3900 JOG ROAD
BOCA RATON, FL 33434 US

New Mailing Address:

FEI Number: 59-0942383 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN VALKENBURG, KATHY J
SAINT ANDREW'S SCHOOL
3900 JOG ROAD
BOCA RATON, FL 33434 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: PT () Delete
Name: KREJCAREK, ANN MARIE
Address: 3900 JOG ROAD
City-St-Zip: BOCA RATON, FL 33434 US

Title: CT () Delete
Name: BROLLEY, KEVIN
Address: 1145 BEACH DRIVE
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: VCT () Delete
Name: BOK, DIANE
Address: 456 E COCONUT PALM ROAD
City-St-Zip: BOCA RATON, FL 33432 US

Title: TT () Delete
Name: NADEL, PHILIP L
Address: 5767 HAMILTON WAY
City-St-Zip: BOCA RATON, FL 33496 US

Title: AT () Delete
Name: CORK, PHILIP
Address: 1185 LANDINGS RUN
City-St-Zip: WEST PALM BEACH, FL 33413 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: PHILIP CORK

AT

04/08/2009

Electronic Signature of Signing Officer or Director

_____ Date