

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

1996-1-1-96

B- 2923 C

DOCUMENT # 704244

(3)

1. Corporation Name

PATRONS OF ST JOHN'S PARISH DAY SCHOOL, INC.

Principal Place of Business

315 MADISON ST.
SUITE 1024
TAMPA FL 33602-1844

Mailing Address

315 MADISON ST.
SUITE 1024
TAMPA FL 33602-1844



3. Date Incorporated or Qualified
07/03/1962

3a. Date of Last Report
02/28/1995

2. Principal Place of Business

2a. Mailing Address

21 906 S. ORLEANS

26 600 S. MAGNOLIA AVE

4. FEI Number
23-7128359

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27 SUITE 125

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

23 TAMPA, FL

28 TAMPA, FL

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 33606

25 USA

29 33606

30 USA

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHAFFER, JULIE
405 BAYVIEW STREET
SAFETY HARBOR FL 34695

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

906 S. ORLEANS

83

84 City

TAMPA

FL

85 Zip Code

33606

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Julie Shaffer

3/27/96

Signature typed or printed name of registered agent, if different from above

NOTE: For a New Agent Signature, return this form with change

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	☒ DELETE
NAME	TURNER, J. A	
STREET ADDRESS	220 BLANCA AVE	
CITY - ST - ZIP	TAMPA FL	
TITLE	PD	☐ DELETE
NAME	LEACH, GEORGE	
STREET ADDRESS	617 HUDSON AVE	
CITY - ST - ZIP	TAMPA FL	
TITLE	SD	☐ DELETE
NAME	SHAFFER, JULIE	
STREET ADDRESS	405 BAYVIEW STREET	
CITY - ST - ZIP	SAFETY HARBOR FL	
TITLE	D	☒ DELETE
NAME	EDGAR, BONNIE	
STREET ADDRESS	2611 BAYSHORE BLVD., #1202	
CITY - ST - ZIP	TAMPA FL	
TITLE	D	☒ DELETE
NAME	GENTER, JOHN	
STREET ADDRESS	559 LADRONE AVENUE	
CITY - ST - ZIP	TAMPA FL	
TITLE	D	☒ DELETE
NAME	MARSTON, CATHERINE	
STREET ADDRESS	2605 SUNSET DRIVE	
CITY - ST - ZIP	TAMPA FL	

11 TITLE	VD	☐ Change ☒ Addition
12 NAME	CARDL WOODROFFE	
13 STREET ADDRESS	4306 SWANN AVE	
14 CITY - ST - ZIP	TAMPA, FL 33609	
21 TITLE	TD	☐ Change ☒ Addition
22 NAME	SARAH RIVAS	
23 STREET ADDRESS	4510 WATROUS AVE	
24 CITY - ST - ZIP	TAMPA, FL 33629	
31 TITLE		☐ Change ☐ Addition
32 NAME	SEE ATTACHED LIST	
33 STREET ADDRESS	OF TRUSTEES	
34 CITY - ST - ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Julie Shaffer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Us, State Phone #

CR2E037 (12/95)

704244

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PATRONS DIRECTORS 1995/96

George Leach, President
617 Hudson Avenue
Tampa, FL 33606

Julie Shafer, Secretary
405 Bayview Street
Safety Harbor, FL 34695

Carol Woodroffe, Vice-President
4306 Swann Avenue
Tampa, FL 33609

Sarah Rivas, Treasurer
4510 Watrous Avenue
Tampa, FL 33629

R. Lee Casey
2918 Tambay Avenue
Tampa, FL 33611

E. Ray Charles
3617 Jetton Avenue
Tampa, FL 33629

Frances Colgan
3311 McKay Avenue
Tampa, FL 33609

Bonnie Edgar
2611 Bayshore Blvd. #1202
Tampa, FL 33629

John Genter
559 Ladrone Avenue
Tampa, FL 33606

Cindy Hadlow
2610 Sunset Drive
Tampa, FL 33629

Roxanne Leto
13104 Townsend Lane
Tampa, FL 33612

Catherine Marston
2605 Sunset Drive
Tampa, FL 33629

Cathy Smith
17408 Gunn Highway
Odessa, FL 33556

Doug Tozier
3103 Lawn Avenue
Tampa, FL 33611

Hulon Williams
P. O. Box 439
Tampa, FL 33601