FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 710557

(0)

Mailing Address

EPISCOPAL HIGH SCHOOL OF JACKSONVILLE, FLORIDA,

4455 ATLANTIC BLVD. JACKSONVILLE FL 32207		4455 ATLANTIC BLVD. JACKSONVILLE FL 32207-2121				
					 Date Incorporated or Qualified 03/21/1966 	3a. Date of Last Report 04/15/1996
Principal Place of Business The state of Business The state of Business		2a. Mailing Address 26		4. FEI Number 59-1147278	Applied For Not Applicable	
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	9	Crty & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30		8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes X No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent
			81	Name		
BUSEY, S SMITH &	stephen D. Hulsey		82	Street Add	dress (P.O. Box Number is Not Acceptab	θ)
	. NATIONAL BANK TOWER		83			
	WILLE FL 32201-0315		B4	City		FL 85 Zip Code
office or reagent. La	egistered agent, or boln, in the State on familiar with, and accept the obligation	of Florida. Such change tions of, Section 617.050	was authorized by 03, Florida Statutes	the corpora s.	poration submits this statement for the p ation's board of directors. I hereby accep	t the appointment as registered
12.	Signature, typed or printed name of registered agen		(NOTE Registered Age	nt signature requ		DATE
TITLE	CD OFFICERS AND	DELET	13.		ADDITIONS/CHANGES TO OFFIC	
NAME	GRAHAM, HENRY H., JR. "TIP"	E DELEI				Change Addition
STREET ADDRESS	3787 ORTEGA BLVD.		1.2 NAME	ADDDCCC		
CITY-ST-ZIP	JACKSONVILLE, FL 32210		1.3 STREET	1		
TITLE	TD	DELET	1.4 CITY - S E 2.1 TITLE	1-2IP		Change Addition
NAME	SWINDELL, JAMES R.		2.2 NAME			Control Control
STREET ADDRESS	1016 SEAWOOD DR.		2.3 STREET	ADDRESS		
CITY-ST-ZIP	NEPTUNE BCH FL 32266		2. 4 CITY-			
TITLE	VCD	DELET				☐ Change ☐ Addition
NAME	WELTSEK, GUSTAVE J. JR.		3.2 NAME	ľ		
STREET ADDRESS	7504 HOLIDAY RD S.		3.3 STREET	ADDRESS		
CITY-S1-ZIP	JACKSONVILLE, FL 32216		3.4. CITY-1	ST-ZIP		
TITLE	SD	☐ DELET	É 4,1 TITLE	·		Change Addition
NAME	WINGARD, GAILE E.		4. 2 NAME	İ		
STREET ADDRESS	4531 ORTEGA BLVD.		4.3 STREET	ADDRESS		
CITY - ST - ZIP	JACKSONVILLE FL 32210		4.4 CITY - S	T-21P		
TITLE	D BUCEV EXECUTED D	☐ DELET				Change Addition
NAME	BUSEY, STEPHEN D		5.2 NAME			
STREET ADDRESS	3847 ORTEGA BLVD		5.3 STREET			
CITY - ST - ZIP	JACKSONVILLE, FL 32210	DELET	5.4 CITY-S	T-ZIP		[] () () () () () () () () () () () () ()
TITLE		ויין טבנבו				Change Addition
NAME PIDECT ADDOCCO			6.2 NAME	4 DDD0000		
STREET ADDRESS			6.3 STREET	AUUKESS		

SIGNATURE:

14. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

<u>9043597700</u>

FILED

Jan 27 1997 8:00am

Secretary of State