2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#710557

FILED Apr 03, 2009 Secretary of State

Entity Name: EPISCOPAL HIGH SCHOOL OF JACKSONVILLE, FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

4455 ATLANTIC BLVD. JACKSONVILLE, FL 32207

Current Mailing Address: New Mailing Address:

4455 ATLANTIC BLVD. JACKSONVILLE, FL 32207

FEI Number: 59-1147278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STEPHEN, BUSEY D MR. STEPHEN, BUSEY D MR. 3847 ORTEGA BLVD 4455 ATLANTIC BLVD

JACKSONVILLE, FL 32210 US JACKSONVILLE, FL 32207 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: 04/03/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: C () Delete Title: C (X) Change () Addition

 Name:
 MCNULTY, THÂD L MR.
 Name:
 JONES, RICK H MR.

 Address:
 1881 CHALEN AVENUE
 Address:
 4455 ATLANTIC BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32205 US
 City-St-Zip:
 JACKSONVILLE, FL 32207 US

Title: T () Delete Title: T (X) Change () Addition

 Name:
 JONES, RICK H MR.
 Name:
 STROM, JOHN D MR.

 Address:
 12916 BAY PLANTATION DRIVE
 Address:
 4455 ATLANTIC BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32223 US
 City-St-Zip:
 JACKSONVILLE, FL 32207 US

Title: S () Delete Title: S (X) Change () Addition

Name: MICHAEL, LEWIS F MR. Name: MICHAEL, LEWIS F MR.

Address: 24765 HARBOR VIEW DRIVE Address: 4455 ATLANTIC BLVD

City-St-Zip: PONTE VEDRA BEACH, FL 32082 US City-St-Zip: JACKSONVILLE, FL 32207 US

City-5t-zip. PONTE VEDRA BEACH, PL 32082 05 City-5t-zip. JACKSONVILLE, PL 32207 05

 $\label{eq:title: VC () Delete Title: VC (X) Change () Addition} \end{minipage}$

Name: HARRISON, JR, EDWARD H MR Name: WOODALL, P J MR
Address: 2402 PINE ISLAND Address: 4455 ATLANTIC BLVD

City-St-Zip: JACKSONVILLE, FL 32224 US City-St-Zip: JACKSONVILLE, FL 32207 US

Title: D (X) Delete Title: () Change () Addition

 Name:
 HUGH, MAGEVNEY M MR.
 Name:

 Address:
 4705 ALGONQUIN AVENUE
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32210 US
 City-St-Zip:

Title: C () Delete Title: C (X) Change () Addition

 Name:
 MCNULTY, THAD L MR.
 Name:
 JONES, RICK H MR.

 Address:
 1881 CHALEN AVENUE
 Address:
 4455 ATLANTIC BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32205 US
 City-St-Zip:
 JACKSONVILLE, FL 32207 US

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: RICK H. JONES C 04/03/2009