

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 711993

FILED
Apr 08, 2002 8:00 AM
Secretary of State

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

Current Principal Place of Business:

4455 ATLANTIC BLVD.
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

4455 ATLANTIC BLVD.
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 23-7003394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NASH, E. WILLIAM MR.
505 LANCASTER ST.
APARTMENT 7 A/B
JACKSONVILLE, FL 32204 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: BRYAN, JACOB F IV MR.
Address: 5249 YACHT CLUB ROAD
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: D () Delete
Name: DONAHOO, THOMAS M MR.
Address: 4364 MCGIRTS BLVD
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: D () Delete
Name: ABNEY, MICHAEL D MR.
Address: 4830 MAID MARIAN LANE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: C () Delete
Name: NASH, E. WILLIAM, JR MR.
Address: 505 LANCASTER STREET
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: S () Delete
Name: STEIN, ROBERT L MR.
Address: 3903 ORTEGA BLVD
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: T () Delete
Name: WINSTON, JAMES H MR.
Address: PO BOX 2820 NA
City-St-Zip: JACKSONVILLE, FL 32204 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MCRAE, JR., WALTER A MR.
Address: 1560 LANCASTER TERRACE
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: D (X) Change () Addition
Name: ABNEY, MICHAEL D MR.
Address: 108 PLANTATION CIRCLE
City-St-Zip: PONTE VEDRA BEACH, FL 32082 US

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 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: E. WILLIAM NASH, JR.

C

04/08/2002

Electronic Signature of Signing Officer or Director

Date