

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717318

FILED  
Jan 09, 2008  
Secretary of State

Entity Name: JACKSONVILLE COUNTRY DAY SCHOOL, INC.

**Current Principal Place of Business:**

10063 BAYMEADOWS RD  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

10063 BAYMEADOWS RD  
JACKSONVILLE, FL 32256

**New Mailing Address:**

FEI Number: 59-0905430

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORROW, MIKE  
10063 BAYMEADOWS RD  
JACKSONVILLE, FL 32256 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: PD ( ) Delete  
Name: BURR, EDWARD E  
Address: 3909 DUVAL DRIVE  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VP ( ) Delete  
Name: BURNS, CHRISTOPHER G  
Address: 4005 ALHAMBRA DRIVE W  
City-St-Zip: JACKSONVILLE, FL 32207

Title: CSD ( ) Delete  
Name: ELIAS, POPPI  
Address: 8586 ROYALWOOD DR.  
City-St-Zip: JACKSONVILLE, FL 32256

Title: T ( ) Delete  
Name: ADKINS, TOMMY  
Address: 8298 WOODGROVE ROAD  
City-St-Zip: JACKSONVILLE, FL 32256

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BURNS, CHRISTOPHER G  
Address: 4005 ALHAMBRA DR. W.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP (X) Change ( ) Addition  
Name: YIP, DANIEL S  
Address: 7612 WEXFORD CLUB DR. W.  
City-St-Zip: JACKSONVILLE, FL 32256

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: MIKE MORROW

RA

01/09/2008

Electronic Signature of Signing Officer or Director

Date