

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 723169 (9)
1. Corporation Name

GRACE PARISH DAY SCHOOL, INC



Principal Place of Business

230 KINGSLEY AVE
ORANGE PARK FL 32073

Mailing Address

230 KINGSLEY AVE
ORANGE PARK FL 32073

3. Date Incorporated or Qualified
04/14/1972

3a. Date of Last Report
04/05/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

59-1152229

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

SAWICKI, SALLY
2700 HOLLY POINT ROAD, WEST
ORANGE PARK 32073

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

D
NAME CHESTER, JAMES
STREET ADDRESS 1878 OSPREY BLUFF BLVD
CITY - ST - ZIP ORANGE PARK, FL 00000

TITLE ☒ DELETE

D
NAME GASH, DIANE
STREET ADDRESS 2793 ADMIRAL'S WALK N.
CITY - ST - ZIP ORANGE PARK, FL 00000

TITLE ☒ DELETE

CD
NAME SAWICKI, SALLY
STREET ADDRESS 1853 ABA DR.
CITY - ST - ZIP ORANGE PARK FL

TITLE ☐ DELETE

V
NAME SCHIFANELLA, ELLEN
STREET ADDRESS 4282 VENETIA BLVD
CITY - ST - ZIP JACKSONVILLE, FL 00000

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☒ Addition

VP, D
NAME Shelley Tebo
13 STREET ADDRESS 1836 Creekbank Drive
14 CITY - ST - ZIP Middleburg, FL 32068 ☐ Change ☒ Addition

21 TITLE ☐ Change ☒ Addition

T, D
NAME Dana Brodsky
23 STREET ADDRESS 440 Battlecreek Ct. E.
24 CITY - ST - ZIP Jacksonville, FL 32258 ☐ Change ☐ Addition

31 TITLE ☐ Change ☐ Addition

CD
NAME Sawicki, Sally
33 STREET ADDRESS 2700 Holly Pt. Road, W.
34 CITY - ST - ZIP Orange Park, FL 32073 ☐ Change ☐ Addition

41 TITLE ☐ Change ☐ Addition

200001863342
-06/17/96--01024--006-01-96 OR
***61.25

51 TITLE ☐ Change ☐ Addition

D
NAME Ren Schuemann
53 STREET ADDRESS 316 Frog Hollow Rd.
54 CITY - ST - ZIP Orange Park, FL 32073

61 TITLE ☐ Change ☐ Addition

D
NAME Kate Merritt
63 STREET ADDRESS 2558 Admirals Walk Drvie, S.
64 CITY - ST - ZIP Orange Park, FL 32073

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)