

FILE NOW: FILING FEE IS \$61.25

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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90130 041 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 723169 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		

775/8 - 90130 - 41



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		04/14/1972	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1152229	
City & State		City & State		5. Certificate of Status Desired ☐	
23		28		8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing	
24		29		Trust Fund Contribution ☐	
Country		Country		5.00 May Be Added to Fees	
25		30			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
TEBO, SHELLEY 1836 CREEKBANK DRIVE MIDDLEBURG FL 32068				81 Name <u>Eloise Hill</u> 82 Street Address (P.O. Box Number is Not Acceptable) <u>508 Daybreak Ct.</u> 83 <u></u> 84 City <u>Orange Park</u> FL 85 Zip Code <u>32073</u>			

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 Eloise T. Hill Chairman DATE 4-26-99

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	CD	☐ DELETE		1.1 TITLE	D	☒ Change ☐ Addition	
NAME	TEBO, SHELLEY			1.2 NAME	Tebo, Shelley		
STREET ADDRESS	1836 CREEKBANK DR.			1.3 STREET ADDRESS	1836 Creekbank Drive		
CITY-ST-ZIP	MIDDLEBURG FL			1.4 CITY-ST-ZIP	Middleburg FL 32068		
TITLE	TD	☐ DELETE		2.1 TITLE		☐ Change ☐ Addition	
NAME	BRODSKY, DANA			2.2 NAME			
STREET ADDRESS	440 BATTLECREEK CT. EAST			2.3 STREET ADDRESS			
CITY-ST-ZIP	JACKSONVILLE FL 32258			2.4 CITY-ST-ZIP			
TITLE	D	☒ DELETE		3.1 TITLE	CD	☐ Change ☒ Addition	
NAME	SAWICKI, SALLY			3.2 NAME	Eloise Hill		
STREET ADDRESS	2700 HOLLY POINT RD. WEST			3.3 STREET ADDRESS	508 Daybreak Ct.		
CITY-ST-ZIP	ORANGE PARK FL			3.4 CITY-ST-ZIP	Orange Park FL 32073		
TITLE	MD	☐ DELETE		4.1 TITLE	MD	☒ Change ☐ Addition	
NAME	OAKES, MARTHA			4.2 NAME	Oakes, Martha		
STREET ADDRESS	2801 BRICHWOOD DRIVE			4.3 STREET ADDRESS	2801 Birchwood Drive		
CITY-ST-ZIP	ORANGE PARK FL			4.4 CITY-ST-ZIP	Orange Park FL 32073		
TITLE	D	☒ DELETE		5.1 TITLE	D	☐ Change ☒ Addition	
NAME	MUFFET MORAN			5.2 NAME	Stuart Harris		
STREET ADDRESS	259 HOLLY POINT RD W			5.3 STREET ADDRESS	1752 County Rd 315		
CITY-ST-ZIP	ORANGE PARK FL 32073			5.4 CITY-ST-ZIP	Green Cove Springs FL 32043		
TITLE	D	☒ DELETE		6.1 TITLE	D	☐ Change ☒ Addition	
NAME	MCHUGH, KIM			6.2 NAME	Gladding, Mary		
STREET ADDRESS	7734 ANDES DR.			6.3 STREET ADDRESS	1738 Pickwick Place		
CITY-ST-ZIP	JACKSONVILLE FL			6.4 CITY-ST-ZIP	Orange Park FL 32073		

14. I 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eloise T. Hill SIGNATURE REQUIRED 4-26-99 904-215-2245

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)

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444878-90130-41

ADDITIONAL DIRECTORS

D

Frank Arceneaux
2422 Acadie Drive
Jacksonville, FL 32259

D

Lennis DeBartolomeis
339 River Reach Road
Orange Park, FL 32073

D

Carol Hart
603 Los Palmas Drive
Orange Park, FL 32073

D

Patti Millican
2363 LaVista Lane
Orange Park, FL 32073

D

Stuart Stokes
2263 Grey Fox Court
Orange Park, FL 32073

D

Ray Watkins
5043 Haberwood Oaks Terrace
Jacksonville, FL 32244