

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90796 021 ****61.25

DOCUMENT # 723169

1. Entity 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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1152229**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DRISKELL, GREG
1810 ROYAL FERN LANE
ORANGE PARK FL 32003**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
NAME **ECCLESTON, JACK**
STREET ADDRESS **2001 EPSILON COURT**
CITY-ST-ZIP **ORANGE PARK FL 32073**

TITLE **S** ☐ Change ☒ Addition
NAME **Steve Van Dyke**
STREET ADDRESS **1508 Silver Bell Lane**
CITY-ST-ZIP **Orange Park FL 32073**

TITLE **D** ☒ Delete
NAME **TREFFINGER, SANDY**
STREET ADDRESS **3621 WATERIDGE DRIVE**
CITY-ST-ZIP **ORANGE PARK FL 32065**

TITLE **D** ☐ Change ☐ Addition
NAME **Jeff Bryan**
STREET ADDRESS **603 Pembroke Ct**
CITY-ST-ZIP **Orange Park FL 32073**

TITLE **D** ☒ Delete
NAME **ARCENEUX, FRANK**
STREET ADDRESS **2422 ACADIE DR**
CITY-ST-ZIP **JACKSONVILLE FL 32217**

TITLE **D** ☐ Change ☐ Addition
NAME **Stephanie Herron**
STREET ADDRESS **2060 Watercrest Drive**
CITY-ST-ZIP **Orange Park FL 32073**

TITLE **MD** ☐ Delete
NAME **MILTON, MARTHA**
STREET ADDRESS **133 WATER'S EDGE DR N**
CITY-ST-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE **C** ☐ Change ☐ Addition
NAME **Greg Driskell**
STREET ADDRESS **1810 Royal Fern Lane**
CITY-ST-ZIP **Orange Park FL 32073**

TITLE **D** ☐ Delete
NAME **NELSON, DAVID**
STREET ADDRESS **1774 BUTTONBUSH WAY**
CITY-ST-ZIP **ORANGE PARK FL 32003**

TITLE **D** ☐ Change ☐ Addition
NAME **Carla Henson-Bowden**
STREET ADDRESS **3692 Windmoor Dr.**
CITY-ST-ZIP **Jacksonville FL 32217**

TITLE **D** ☒ Delete
NAME **PITMAN, SUSAN**
STREET ADDRESS **4620 ARAPANGE AVENUE**
CITY-ST-ZIP **JACKSONVILLE FL 32210**

TITLE **D** ☐ Change ☐ Addition
NAME **Pat Osteen**
STREET ADDRESS **1861 Osprey Bluff Blvd**
CITY-ST-ZIP **Orange Park FL 32073**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **MARTHA MILTON**

4-16-03 904 269 3718

CR2E037 (10/02)

attachment 10094830
#723169

D
Ren Weise
1360 Avondale
Jacksonville, FL 32210