2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2008
Secretary of State

DOCUMENT# 730942

Entity Name: GREENWOOD SCHOOL, INC.

Current Principal Place of Business:

9920 REGENCY SQUARE BLVD
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

9920 REGENCY SQUARE BLVD
JACKSONVILLE, FL 32225

New Mailing Address:

FEI Number: 59-1579415 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LEGLER, MITCHELL W
300 WHARFSIDE WAY SUITE A
JACKSONVILLE, FL 32207 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:	C	( ) Delete
Name:	HYMAN, CHARLES	
Address:	4300 MARSH LANDING BLVD. #201	
City-St-Zip:	JACKSONVILLE BEACH, FL 32250	
Title:	D	( ) Delete
Name:	CONNELL, BEVERLY	
Address:	9920 REGENCY SQUARE BLVD	
City-St-Zip:	JACKSONVILLE, FL 32225	
Title:	D	( ) Delete
Name:	DAVIS, BRENDA	
Address:	6400 SAN PABLO ROAD SOUTH	
City-St-Zip:	JACKSONVILLE, FL 32224	
Title:	D	( ) Delete
Name:	WALKER, MARTY	
Address:	7928 STRATFORD CHASE LANE	
City-St-Zip:	JACKSONVILLE, FL 32256	
Title:	D	( ) Delete
Name:	SOUTHWELL, VIVIAN	
Address:	119 SEA HAMMOCK WAY	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	T	( ) Delete
Name:	WESTBROOK, TRACEY	
Address:	9004 REGENCY SQUARE BLVD	
City-St-Zip:	JACKSONVILLE, FL 32211	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	D	(X) Change ( ) Addition
Name:	HYMAN, CHARLES	
Address:	4300 MARSH LANDING BLVD. #201	
City-St-Zip:	JACKSONVILLE BEACH, FL 32250	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	C	(X) Change ( ) Addition
Name:	SOUTHWELL, VIVIAN	
Address:	119 SEA HAMMOCK WAY	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
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: BEVERLY CONNELL MRS. 04/22/2008

Electronic Signature of Signing Officer or Director — Date