

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 751824

1. Entity Name

ST. MARY'S EPISCOPAL DAY SCHOOL, INC.

Principal Place of Business

2101 S. HUBERT AVE.
TAMPA FL 33629
US

Mailing Address

2101 S. HUBERT AVE.
TAMPA FL 33629-5648
US

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

59-1985294

Applied For

Not Applicable

5. Certificate of Status Desired XX

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRUIETT, SUZAN
2101 S HUBERT AVE
TAMPA FL 33629

7. Name and Address of New Registered Agent

Name: Marilyn Mullen Healy, Esq.
Street Address (P.O. Box Number is Not Acceptable): Ruden, McClosky, Smith, Schuster & Russell, P.A.
401 E. Jackson Street, Suite 2700
City: Tampa FL Zip Code: 33602

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.

SIGNATURE: *Marilyn Mullen Healy*
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 Department of State

10.

OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TRT	RUSS, ANDREW R	3007 CHAPIN AVE.	TAMPA, FL 00000	<input type="checkbox"/>
TR	DONLON, KEVIN F FR	4311 SAN MIGUEL	TAMPA, FL 00000	<input type="checkbox"/>
TRC	NOLEN, KATHLEEN	4501 WOODMERE RD	TAMPA, FL 00000	<input checked="" type="checkbox"/>
TR	COLEMAN, JOAN	3626 BEACH DR.	TAMPA, FL 00000	<input checked="" type="checkbox"/>
TR	BLANTON, LEE	3706 EMPEDRADO ST.	TAMPA FL	<input checked="" type="checkbox"/>
TR	PARIDO, HARVEY	4906 NEW PROVIDENCE	TAMPA FL 33629	<input type="checkbox"/>

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
Trustee/Treasurer	Andrew J. Russ	4306 Swann Ave.	Tampa, FL 33629	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Trustee	Mary Lee Josey, MD	1910 Brookline St.	Tampa, FL 33629	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Trustee	Elizabeth Fowler	1902 Wykagyl St.	Tampa, FL 33629	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Trustee	Stuart Keith	4507 S. Oak Dr. #P-61	Tampa, FL 33611	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

T. LEWIS MAR 30 2000

20 MARCH 913-251-1660

FILED
00 MAR 30 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CRP037 (9/98)