

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 # 755390 (2)

1. Corporation Name

THE DEPAUL SCHOOL OF NORTHEAST FLORIDA, INC.



Principal Place of Business

Mailing Address

6620 ARLINGTON EXPRESSWAY
JACKSONVILLE FL 32211
US

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JACKSONVILLE FL 32211
US

3. Date Incorporated or Qualified
12/05/1980

3a. Date of Last Report
02/07/1995

2. Principal Place of Business

2a. Mailing Address

21 **6620 Arlington Exway**

26 **same**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **Jacksonville, FL**

28 City & State

24 Zip

Country

29 Zip

Country

32211

USA

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ZARICKI, LESLIE
6620 ARLINGTON EXPRESSWAY
JACKSONVILLE FL 32211**

81 Name **Leslie Zaricki**

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

83 **6620 Arlington Expressway**

84 City **Jacksonville** **FL** 85 Zip Code **32211**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE
NAME **ANDERSON, DOUG**
STREET ADDRESS **3432 VICTORIA PARK RD**
CITY-ST-ZIP **JACKSONVILLE FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **VPD** ☒ DELETE
NAME **ANDERSON, DOUG**
STREET ADDRESS **3432 VICTORIA PARK RD**
CITY-ST-ZIP **JACKSONVILLE FL**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **Vice President**
2.3 STREET ADDRESS **Mike McNamara**
2.4 CITY-ST-ZIP **2276 Fallen Tree Dr., E Jacksonville, FL 32246**

TITLE **DT** ☐ DELETE
NAME **HALL, ANGIE**
STREET ADDRESS **6326 CRANBERRY LANE, W.**
CITY-ST-ZIP **JACKSONVILLE FL**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **Director-Secretary**
3.3 STREET ADDRESS **Angie Hall**
3.4 CITY-ST-ZIP **6326 Cranberry Lane, W Jacksonville, FL 32244**

TITLE **D** ☒ DELETE
NAME **ZARICKI, LESLIE**
STREET ADDRESS **10625 QUAILRIDGE DR**
CITY-ST-ZIP **ST AUGUSTINE FL**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **Director-Treasurer**
4.3 STREET ADDRESS **Rhonda Dolan**
4.4 CITY-ST-ZIP **14053 Broken Bow Dr., S Jacksonville, FL 32225**

TITLE **VPS** ☒ DELETE
NAME **BLASSER, LYNN**
STREET ADDRESS **6050 OAKBROOK CT**
CITY-ST-ZIP **PONTE VEDRA BEACH FL**

5.1 TITLE ☐ Change ☒ Addition
5.2 NAME **Director**
5.3 STREET ADDRESS **Nancy Russell**
5.4 CITY-ST-ZIP **760 Tidewater Ct. Ponte Vedra Beach, FL 32082**

TITLE **T** ☒ DELETE
NAME **PEREZ-POVEDA, TRUDY**
STREET ADDRESS **8282 WOODGROVE RD**
CITY-ST-ZIP **JACKSONVILLE FL**

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME **Director**
6.3 STREET ADDRESS **Theresa Snider**
6.4 CITY-ST-ZIP **251 Aralia Lane Jacksonville, FL 32216**

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: *X Doug Anderson*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-26-96

(904) 721-8034

CR2E037 (12/95)