

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90032 020 ****61.25

DOCUMENT # 755390

1. Entity Name

THE DEPAUL SCHOOL OF NORTHEAST FLORIDA, INC.

Principal Place of Business

**6620 ARLINGTON EXPRESSWAY
 JACKSONVILLE FL 32211
 US**

Mailing Address

**6620 ARLINGTON EXPRESSWAY
 JACKSONVILLE FL 32211
 US**

00001001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2112091

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**CANE, GAYLE F
 THE DEPAUL SCHOOL
 6620 ARLINGTON EXPRESSWAY
 JACKSONVILLE FL 32211**

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.

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
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	DOLAN, RHONDA	
STREET ADDRESS	14053 BROKEN BOW DRIVE SOUTH	
CITY-ST-ZIP	JACKSONVILLE FL 32225	
TITLE	D	<input type="checkbox"/> Delete
NAME	MC NAMARA, MIKE	
STREET ADDRESS	2276 FALLEN TREE DR., E	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	CRATEM, GEORGE III	
STREET ADDRESS	5442 WOODWIND TERR	
CITY-ST-ZIP	JACKSONVILLE FL 32277	
TITLE	AT	<input type="checkbox"/> Delete
NAME	PROBST, DIANE	
STREET ADDRESS	14333 FALCONHEAD DRIVE	
CITY-ST-ZIP	JACKSONVILLE FL 32224	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	STOUT, LINDA	
STREET ADDRESS	221 MAGNOLIA ST	
CITY-ST-ZIP	ATLANTIC BCH FL 32233	
TITLE	D	<input type="checkbox"/> Delete
NAME	BENOIT, ROBERT	
STREET ADDRESS	1460 RIVER HILLS CIR E	
CITY-ST-ZIP	JACKSONVILLE FL 32211	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Amaro, Ken	
STREET ADDRESS	3875 Fernglan Dr	
CITY-ST-ZIP	JACKSONVILLE FL 32277	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Don Cameron	
STREET ADDRESS	50N. Laura Street	
CITY-ST-ZIP	JACKSONVILLE FL 32202	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Patrick Yack	
STREET ADDRESS	One Riverside Ave POBox 1949	
CITY-ST-ZIP	JACKSONVILLE FL 32231	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Fred Odom	
STREET ADDRESS	5730 Bowden Rd Suite 200	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas Jenks	
STREET ADDRESS	200 W. Forsyth St #1400	
CITY-ST-ZIP	JACKSONVILLE FL 32202	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kathryn Umberger	
STREET ADDRESS	1854 River Road	
CITY-ST-ZIP	JACKSONVILLE FL 32207	

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

2-28-02

Date

904 724 0102

Daytime Phone #

CR2E037 (9/01)