

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755390

FILED  
Jan 08, 2007  
Secretary of State

**Entity Name:** THE DEPAUL SCHOOL OF NORTHEAST FLORIDA, INC.

**Current Principal Place of Business:**

6620 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211 US

**New Principal Place of Business:**

**Current Mailing Address:**

6620 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211 US

**New Mailing Address:**

**FEI Number:** 59-2112091

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CANE, GAYLE F  
THE DEPAUL SCHOOL  
6620 ARLINGTON EXPRESSWAY  
JACKSONVILLE, FL 32211 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: T ( ) Delete  
Name: CAMERON, DONALD  
Address: 50 N LAURA ST #3000  
City-St-Zip: JACKSONVILLE, FL 32202

Title: S ( ) Delete  
Name: DATZ, LAWRENCE  
Address: 9123 TRENT WAY  
City-St-Zip: JACKSONVILLE, FL 32257

Title: V ( ) Delete  
Name: SCHRADER, ELANA  
Address: 253 LINKSIDE CIRCLE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete  
Name: UMBERGER, KATHRYN  
Address: 1854 RIVER RD.  
City-St-Zip: JACKSONVILLE, FL 32207

Title: P ( ) Delete  
Name: JENKS, THOMAS  
Address: 200 W FORSYTH ST #1400  
City-St-Zip: JACKSONVILLE, FL 32202

Title: V ( ) Delete  
Name: AMARO, KEN  
Address: 3875 FERNLEEN DR.  
City-St-Zip: JACKSONVILLE, FL 32277

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: DATZ, LAWRENCE  
Address: 4348 SOUTHPOINT BLVD. SUITE 330  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D (X) Change ( ) Addition  
Name: SCHRADER, ELANA  
Address: 253 LINKSIDE CIRCLE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D (X) Change ( ) Addition  
Name: UMBERGER, KATHRYN  
Address: 6724 EPPING FOREST WAY N  
City-St-Zip: JACKSONVILLE, FL 32217

Title: P (X) Change ( ) Addition  
Name: JENKS, THOMAS  
Address: 245 RIVERSIDE AVE SUITE 400  
City-St-Zip: JACKSONVILLE, FL 32202

Title: V (X) Change ( ) Addition  
Name: AMARO, KEN  
Address: 7841 FEATHER OAKS DRIVE  
City-St-Zip: JACKSONVILLE, FL 32277

I hereby certify that the information supplied with this filing does not qualify for the 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: GAYLE F. CANE

PRES

01/08/2007

Electronic Signature of Signing Officer or Director

Date