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FILED
Jun 29, 2001 8:00 am
Secretary of State

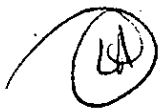
05-04-2001 90173 005 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000002510

1. Entity Name

ST. JOHN'S PARISH DAY SCHOOL, INC.



Principal Place of Business: 906 S. ORLEANS AVE. TAMPA FL 33606
Mailing Address: 906 S. ORLEANS AVE. TAMPA FL 33606

00010000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: Suite, Apt. #, etc. City & State
3. Mailing Address: Suite, Apt. #, etc. City & State

Zip Country Zip Country

4. FEI Number: 74-2986047 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent: PETERSON, JOHN R 906 S. ORLEANS AVE. TAMPA FL 33606

7. Name and Address of New Registered Agent: Name: James K. Murray, Jr. Street Address: 906 S. Orleans Avenue City: Tampa FL Zip Code: 33606

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] James K. Murray Jr. 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

Table with 10 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a Delete checkbox. Rows are currently empty.

Table with 10 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and Change/Addition checkboxes. Row 1: President Steven C. Cherseman, 906 S. Orleans Avenue, Tampa, FL 33606. Row 2: William Hardy, 4831 Flamingo Road, Tampa, FL 33611. Row 3: James Murray Jr., PO Box 30098, Tampa, FL 33630-3098. Row 4: Norman Giovenco, 3404 Fair Oaks, Tampa, FL 33611.

CREC037 (10/00)

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] Steven C. Cherseman 813 259 1091