

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006767

FILED  
Jan 13, 2006  
Secretary of State

Entity Name: ST. THOMAS AQUINAS HIGH SCHOOL, INC.

## Current Principal Place of Business:

2801 SW 12 ST  
FT LAUDERDALE, FL 33312

## New Principal Place of Business:

## Current Mailing Address:

2801 SW 12 ST  
FT LAUDERDALE, FL 33312

## New Mailing Address:

FEI Number: 59-0791007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FITZGERALD, J PATRICK  
110 MERRICK WAY, SUITE 3-B  
CORAL GABLES, FL 33134 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: PD ( ) Delete  
Name: KELLY, VINCENT T  
Address: 9401 BISCAYNE BLVD  
City-St-Zip: MIAMI SHORES, FL 33138

Title: VD ( ) Delete  
Name: JONES, TINA  
Address: 2801 SW 12 ST  
City-St-Zip: FT LAUDERDALE, FL 33312

Title: TD ( ) Delete  
Name: VAUGHAN, JOHN J  
Address: 9401 BISCAYNE BLVD  
City-St-Zip: MIAMI SHORES, FL 33138

Title: SD ( ) Delete  
Name: KELLY, VINCENT T  
Address: 9401 BISCAYNE BLVD  
City-St-Zip: MIAMI SHORES, FL 33138

Title: D ( ) Delete  
Name: HENNESSEY, WILLIAM J REV  
Address: 9401 BISCAYNE BLVD  
City-St-Zip: MIAMI SHORES, FL 33138

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: VINCENT T. KELLY

PD

01/13/2006

Electronic Signature of Signing Officer or Director

Date