

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007425

FILED  
Feb 03, 2009  
Secretary of State

**Entity Name:** HOLY COMFORTER EPISCOPAL SCHOOL, INC.

**Current Principal Place of Business:**

2001 FLEISCHMANN RD.  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

2001 FLEISCHMANN RD.  
TALLAHASSEE, FL 32308

**New Mailing Address:**

**FEI Number:** 59-3325917

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BREWSTER, JAMES R  
541 NORTH MONROE ST., STE. 203  
TALLAHASSEE, FL 32301 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: P ( ) Delete  
Name: HODGES, BARBARA  
Address: 3288 GRAMERCY PLACE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP ( ) Delete  
Name: CHAPIN, CAROLINE  
Address: 1313 COVINGTON DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: S ( ) Delete  
Name: PARRISH, JANET  
Address: 2823 WHITTINGTON DRIVE  
City-St-Zip: TALLAHASSEE, FL 32309

Title: T ( ) Delete  
Name: KNIGHT, GAIL  
Address: 4927 ARDEN FOREST WAY  
City-St-Zip: TALLAHASSEE, FL 32309

**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:

I hereby certify that the information supplied with this filing does not qualify 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: JANET PARRISH

S

02/03/2009

Electronic Signature of Signing Officer or Director

Date