


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 27, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N30345</b> 1. Entry Name SAINT JOSEPH'S EPISCOPAL SCHOOL, INC.	
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Principal Place of Business 3300 B SOUTH SEACREST BOULEVARD BOYNTON BEACH, FL 33435	Mailing Address 3300 B SOUTH SEACREST BOULEVARD BOYNTON BEACH, FL 33435
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01232006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0115103	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRINCE, YVONNE K  
 3300 B SOUTH SEACREST BOULEVARD  
 BOYNTON BEACH, FL 33435

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	ALLERTON, LISA
STREET ADDRESS	76 BEACHWAY DRIVE
CITY-ST-ZIP	OCEAN RIDGE, FL 33435
TITLE	ST
NAME	VALASHINAS, KIMBERLY
STREET ADDRESS	4705 SABLE PALMS DRIVE
CITY-ST-ZIP	BOYNTON BEACH, FL 33436
TITLE	TT
NAME	SWANEY, WILLIAM
STREET ADDRESS	801 S. OCEAN BLVD.
CITY-ST-ZIP	DELRAY BEACH, FL 33483
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

U00000403754  
 02/06/06-80019-020 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Yvonne K. Prince 1-25-06 <sup>1-561-</sup> 732-2045  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

YVONNE K. PRINCE