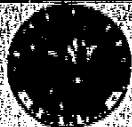


NONPROFIT CORPORATION ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Norcross
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL 17 AM 8:53

DOCUMENT # N94000001747 (4)

1. Corporation Name

ST. MARK EDUCATIONAL CENTER, INC.

Principal Place of Business

**921 ORANGE AVENUE
FORT PIERCE FL 34950**

Mailing Address

**921 ORANGE AVENUE
FORT PIERCE FL 34950**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/08/1994

3a. Date of Last Report

4. FEI Number

65-0440395

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status

☐ **FILING FEE IS \$61.25**

8. This corporation has liability for intangible tax under s. 199 (192 Florida Statutes)

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**INGRAM, JONATHAN REV.
921 ORANGE AVENUE
FORT PIERCE FL 34950**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Jonathan Ingram

Jonathan Ingram - President

DATE

6/20/95

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD

INGRAM, JONATHAN

4700 JUANITA AVENUE

FORT PIERCE FL 34946

VD

WATSON, DONALD

1556 S.E. FACULTY DRIVE

PORT ST. LUCIE FL 34952

SD

INGRAM, DONNA

1010 BERMUDA AVENUE

FORT PIERCE FL 34950

T

LUNA, JESUS

2815 S. 27TH STREET

FORT PIERCE FL 34950

D

TOWNSEND, JEANETTE

807 FRANCIS LANE

FORT PIERCE FL 34950

D

SANDIFER, CHARLES LT.

920 S. U.S. HIGHWAY 1

FORT PIERCE FL 34950

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Jonathan Ingram

Jonathan Ingram

DATE

6/20/95 (407) 465 7454