## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



Ft ORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N9400003623 (5)
1. Corporation Name

ARLINGTON COUNTRY DAY SCHOOL P.T.O., INC.

-							
Principal Place of Business Mailing Address				0 18011181 819 10(11 D1011 0E111 0D111	. EALIN BRIDI BRIDA INIA BIIII	8 11883 1111 1 <b>2</b> 31	
5455 RIVER JACKSONVIL	TRAIL ROAD SOUTH LE FL 32211	5455 RIVER TRAIL RO JACKSONVILLE FL 32					
					3. Date Incorporated or Qualified 07/22/1994	3a. Date of Last 03/02/1	
'	lace of Business	2a. Mailing Address	•		4. FE! Number		Applied For
21		26		<b>59-3268655</b> Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.0 <sup>-</sup>	O May Be	
23		28			Trust Fund Contribution	Added	d to Fees
Zφ	Country	Zip	Country		8. This corporation has liability for i	_ ~ _	199.032,
24	25 9. Name and Address of Curre	29 29 Agent	30		Florida Statutes L  10. Name and Address of New R	Yes No	
	U. Hallo dila Madroso di Gali.		81	Name	TO THE BIT ACCUSES OF THE PARTY	cylatered Agent	
COADTO	DEE D D		82				
Crabtree, R. R. 8375 dix Ellis Trail				Street A	cloress (P.O. Box Number is Not Acceptab	le)	
SUITE 4			83				
	ONVILLE FL 32256						
0/14/100	7111122 12 02200		84	City		FL  85   Zg	Code
or register	to the provisions of Sections 617.050 red agent, or both, in the State of Flo ith, and accept the obligations of, Se	orida. Such change was authori	ized by the corp	named cor oration's b	poration submits this statement for the pur locard of directors. Thereby accept the appo	pose of changing its re pintment as registered	egistered office agent. I am
SIGNATURE							
	Signature, typed or printed name of registered ag-			it signature re	juired when reinstatu gi	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		
TIFLE	NO JOUR	DELETE	11 TITLE			Change	Addition
NAME	NUZUM, GEORGE	(T) (	1.2 NAME				
STREET ADDRESS	5455 RIVER TRAIL RD. SOU	JIH	1.3 STREET				
CITY - ST - ZIP	JACKSONVILLE FL 32211	DELETE	1.4 CITY-S	IT-ZIP		Change	- Address
TITLE NAME		DOLLETE	2.1 TITLE			Change	Addition
STREET ADDRESS	NUZUM, SARAH 5455 RIVER TRAIL RD. SOU	п	2.2 NAME	4000000			
	JACKSONVILLE FL 32211	חות	2 3 STREET				
CITY-ST-ZIP TITLE	X-D-	DELETE	2 4 CHY :	Į.	AD DOM	Change	Addition
NAME	FARRELL, SHIRLEY	<b>2.3</b>	3.2 NAME	• •	Baccy Cardoce	Z Samuel	- Edinorian
STREET ADDRESS	5455 RIVER TRAIL RD. SOU	ITH	3 3 STREET	ADDRESS	Berry Cardace 7120 waikiki Rd		
CITY-ST-ZIP	JACKSONVILLE FL 32211		34 CITY	ST - ZIP	Tacksmille EL 33	مالح	
TITLE	8	<b>M</b> DELETE	41 TITLE		Tacksonville, FL 32	Change	Addit on
NAME	STANTON, VICKY	•	4 2 NAME		Toda Dodring		<i>*</i> *
STREET ADDRESS	5455 RIVER TRAIL RD. SOU	JTH	4.3 STREET	ADDRESS	HOHE Blainhaim P	O C 40	
CITY - \$T - ZIP	JACKSONVILLE FL 32211		4.4 CITY - S	T-7 P -	42.45 Bleinheim Pl Jacksonville, FL	32225	
TITLE	X D ROSK	☐ DELETE	5 1 TITLE		10000179	Change	Addition Addition
NAME	MOÉNCH, PRISCILLA		5.2 NAME		-03/27/96010	2 <b>0011</b> 101042	
STREET ADDRESS	5455 RIVER TRAIL RD. SOU	JTH	5.3 STHEFF	ADDRESS	***61.25	መተ <u>-</u> -በ <b>ተ</b> ሮ	
CITY-ST-ZIP	JACKSONVILLE FL 32211		5.4 CITY - S	II - ZIP			
TITLE		DELETE	6 1 TITLE		& D. Ko.	Change	Addition
NAM€			6.2 NAME		Speicher, Sharron		AGO a
STREET ADDRESS			63 STREET		"1651 Hidden Hills De		( Alchary
CITY, ST. 7IP	1		SACITY S	1.70	300 Managall (2) 1-1 0	2775	מצות

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 119.07(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: Priscula W. Moer Ch. Tribully Welch 2/9/96 90+36-1356