

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90449 033 ****70.00

DOCUMENT # N96000001005

1. Entity Name

HILSDALE CHRISTIAN SCHOOL, INC.

Principal Place of Business

**8060 HILSDALE ROAD
 JACKSONVILLE FL 32216**

Mailing Address

**8060 HILSDALE ROAD
 JACKSONVILLE FL 32216**

LUU36368



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3060 Hilsdale Road
 Suite, Apt. #, etc.
N/A

3. Mailing Address

Same
 Suite, Apt. #, etc.
N/A

City & State

Jacksonville FL

City & State

Same

4. FEI Number

59-3382859

Applied For

Not Applicable

Zip

32216

Country

Duxal

Zip

Same

Country

Same

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WICKSTROM, JEANETTE W
 190 ANNADALE DRIVE EAST
 JACKSONVILLE FL 32225-4122**

Name

Same

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

Same

City

Same

FL

Zip Code

Same

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.

SIGNATURE

Jeannette W. Wickstrom

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/01

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **WICKSTROM, JEANETTE W**
 CITY-ST-ZIP **8060 HILSDALE ROAD
 JACKSONVILLE FL 32216**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **T**
 STREET ADDRESS **STABLES, DONNA L**
 CITY-ST-ZIP **8060 HILSDALE ROAD
 JACKSONVILLE FL 32216**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **T**
 STREET ADDRESS **ROGERS, LOIS O**
 CITY-ST-ZIP **8060 HILSDALE ROAD
 JACKSONVILLE FL 32216**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **T**
 STREET ADDRESS **WICKSTROM, NICHOLAS E**
 CITY-ST-ZIP **NAVAL AIR STATION, ROOSEVELT BLVD.
 JACKSONVILLE FL 32212**

TITLE ☒ Change ☐ Addition
 NAME **Wickstrom, Nicholas E**
 STREET ADDRESS **190 Annandale Drive East**
 CITY-ST-ZIP **Jacksonville FL 32225-4122**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Jeannette W. Wickstrom
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/01 (904) 737-0515
 Date Daytime Phone #

CR2E037 (10/00)