

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000004361

FILED  
Apr 28, 2003  
Secretary of State

Entity Name: ALL SAINTS SCHOOL, INC.

## Current Principal Place of Business:

5888 BLANDING BLVD  
JACKSONVILLE, FL 32244

## New Principal Place of Business:

## Current Mailing Address:

5888 BLANDING BLVD  
JACKSONVILLE, FL 32244

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CURRY, LOIS A  
5888 BLANDING BLVD  
JACKSONVILLE, FL 32244 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: AD ( ) Delete  
Name: WILBUR, ALICE H  
Address: 837 PONTE VEDRA BLVD  
City-St-Zip: PONTE VEDRA BCH, FL 32004

Title: I ( ) Delete  
Name: EVANS, FAYE T  
Address: 9901 CISCO DR  
City-St-Zip: JACKSONVILLE, FL 32219

Title: RD ( ) Delete  
Name: NELSON, MARYAM L  
Address: 5886 110TH ST  
City-St-Zip: JACKSONVILLE, FL 32244

Title: DOE (X) Delete  
Name: JOHNSTON, DENA  
Address: 4638 RAMONA BLVD  
City-St-Zip: JACKSONVILLE, FL 32205

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: O' DONNELL, CONNIE  
Address: 421 BUCKEYE LANE EAST  
City-St-Zip: JACKSONVILLE, FL 32259

Title: D (X) Change ( ) Addition  
Name: HURSTON, LAVERNE  
Address: 469 CRABAPPLE COURT, #A  
City-St-Zip: ORANGE PARK, FL 32073

Title: D (X) Change ( ) Addition  
Name: NEWSOME, JUANITA  
Address: 7255 LUKE STREET  
City-St-Zip: JACKSONVILLE, FL 32210

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CONNIE O' DONNELL

D

04/28/2003

Electronic Signature of Signing Officer or Director

Date