

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006987

FILED
Jan 09, 2008
Secretary of State

Entity Name: ST. JAMES EPISCOPAL SCHOOL, INC.

Current Principal Place of Business:

38 S. HALIFAX DR.
ORMOND BEACH, FL 32176

New Principal Place of Business:

Current Mailing Address:

38 S. HALIFAX DR.
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 59-3550008

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEMONTMOLLIN, HARRY M
38 S HALIFAX DR
ORMOND BEACH, FL 32176 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: MR () Delete
Name: HIGGS, CHRISTOPHER
Address: 143 DEEP WOODS WAY
City-St-Zip: ORMOND BEACH, FL 32174

Title: MR. () Delete
Name: FERGUSON, JOHN
Address: PO BOX 2491
City-St-Zip: DAYTONA BEACH, FL 32115

Title: MR. () Delete
Name: PAPPAS, GEORGE
Address: 39 NEPTUNE AVENUE
City-St-Zip: ORMOND BEACH, FL 32176

Title: DR () Delete
Name: PARK-JADOTTE, JENNIFER
Address: 38 S. HALIFAX DR
City-St-Zip: ORMOND BEACH, FL 32176

Title: MR () Delete
Name: HOLE, STEPHEN
Address: 76 FOXCROFT RUN
City-St-Zip: ORMOND BEACH,, FL 32174

Title: MR. () Delete
Name: MORRIS, STEPHEN B
Address: 44 S HALIFAX DR
City-St-Zip: ORMOND BEACH, FL 32176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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City-St-Zip:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: STEPHEN B. MORRIS

REV.

01/09/2008

Electronic Signature of Signing Officer or Director

Date