# 2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT# 702692** 

Entity Name: SAINT ANDREW'S SCHOOL OF BOCA RATON, INC.

FILED
Aug 18, 2014
Secretary of State
CC8543101738

### **Current Principal Place of Business:**

3900 JOG ROAD

BOCA RATON, FL 33434

## **Current Mailing Address:**

3900 JOG ROAD

BOCA RATON, FL 33434 US

FEI Number: 59-0942383 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

VAN VALKENBURG, KATHY J SAINT ANDREW'S SCHOOL 3900 JOG ROAD BOCA RATON, FL 33434 US

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

#### Officer/Director Detail:

Title PRESIDENT Title CHAIRMAN

NameBENEDICT, PETERNameFINOCCHIARO, MARY JOAddress3900 JOG ROADAddress13650 WEYBURNE DRIVECity-State-Zip:BOCA RATON FL 33434City-State-Zip:DELRAY BEACH FL 33446

Title **SECRETARY** Title **TREASURER** Name SHAPIRO, STEVEN Name ASSAF, NADINE Address 7745 VIA FIRENZE Address 3017 SPANISH RIVER RD City-State-Zip: BOCA RATON FL 33433 City-State-Zip: BOCA RATON FL 33432

Title ASST. TREASURER Title VC

Name CORK, PHILIP Name CARAGOL, WILLIAM J. JR.

Address 1185 LANDINGS RUN Address 6357 NW 33RD AVE

City-State-Zip: WEST PALM BEACH FL 33413 City-State-Zip: BOCA RATON FL 33496-3380

Title ASST TREASURER
Name SCOTT, CHASE M

Address 271 W COCONUT PALM ROAD

City-State-Zip: BOCA RATON FL 33432

I hereby 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 all other like empowered.

SIGNATURE: PHILIP CORK ASST TREASURER 08/18/2014