

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714517

Entity Name: SAINT PAUL'S SCHOOL, INC.**Current Principal Place of Business:**1600 ST. PAUL'S DRIVE
CLEARWATER, FL 33764**Current Mailing Address:**1600 ST. PAUL'S DRIVE
CLEARWATER, FL 33764 US**FEI Number:** 59-1220745**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORLEW, STEFANIE M
1600 ST. PAUL'S DRIVE
CLEARWATER, FL 33764-6461 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:** STEFANIE CORLEW

06/29/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name RUPPEL, CHRIS
Address 2840 W BAY DRIVE, #153
City-State-Zip: BELLEAIR BLUFFS FL 33770

Title VC
Name DUPONT SCHAFFER, MOLLY
Address 201 PALMETTO ROAD
City-State-Zip: BELLEAIR FL 33756

Title TREASURER
Name DANN, ERIC
Address 2402 HAMPTON LANE WEST
City-State-Zip: SAFETY HARBOR FL 34695

Title TRUSTEE
Name LEA, CLARK
Address 426 ST. ANDREWS DRIVE
City-State-Zip: BELLEAIR FL 33756

Title SECRETARY
Name KELLER, HEATHER
Address 4542 HARBOR HILLS DRIVE
City-State-Zip: LARGO FL 33770

Title DIRECTOR OF FINANCE &
OPERATIONS
Name CORLEW, STEFANIE M
Address 1600 ST. PAUL'S DRIVE
City-State-Zip: CLEARWATER FL 33764

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: STEFANIE CORLEW**DIRECTOR OF FINANCE & 06/29/2018
OPERATIONS**

Electronic Signature of Signing Officer/Director Detail

Date