

2025 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:** No**Name and Address of Current Registered Agent:**MARTIN, CAROL A
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:** CAROL ANN MARTIN

01/09/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIR
Name	MEINCK, BRADLEY
Address	720 HARBOR ISLAND
City-State-Zip:	CLEARWATER FL 33767

Title	SECRETARY
Name	HAUENSTEIN, MADISON
Address	3 S PINE CIRCLE
City-State-Zip:	BELLEAIR FL 33756

Title	VICE CHAIR
Name	MARQUARDT, MATTHEW
Address	808 ALAMANDA DRIVE
City-State-Zip:	LARGO FL 33770

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

Title	HEAD OF SCHOOL
Name	CAMPBELL, SAMANTHA
Address	1600 SAINT PAUL'S DRIVE
City-State-Zip:	CLEARWATER FL 33764

Title	TREASURER
Name	POIRIER, STEVEN
Address	526 PONCE DE LEON BLVD
City-State-Zip:	BELLAIR FL 33756

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: CAROL ANN MARTIN**DIRECTOR OF FINANCE & OPERATIONS** 01/09/2025

Electronic Signature of Signing Officer/Director Detail

Date