

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000004869

**Entity Name:** OUR LADY OF THE ROSARY ACADEMY, INC.

**Current Principal Place of Business:**

12226 GLENN HOLLOW DRIVE  
JACKSONVILLE, FL 32226

**Current Mailing Address:**

P.O. BOX 351866  
JACKSONVILLE, FL 32235

**FEI Number: 59-3735928**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

RAINES, TIMOTHY P  
12226 GLENN HOLLOW DRIVE  
JACKSONVILLE, FL 32226 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 TD  
Name RAINES, TIMOTHY P  
Address P.O.BOX 350194  
City-State-Zip: JACKSONVILLE FL 32235

Title VPD  
Name RAINES, STEFANIE M  
Address 12226 GLENN HOLLOW DRIVE  
City-State-Zip: JACKSONVILLE FL 32226

*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 RAINES**

**VPD**

**04/30/2014**

Electronic Signature of Signing Officer/Director Detail

Date