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

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## Current Principal Place of Business:

12226 GLENN HOLLOW DRIVE JACKSONVILLE, FL 32226

DOCUMENT# N0100004869

#### **Current Mailing Address:**

P.O. BOX 351866 JACKSONVILLE, FL 32235

## FEI Number: 59-3735928

## Name and Address of Current Registered Agent:

RAINES, TIMOTHY P 12226 GLENN HOLLOW DRIVE JACKSONVILLE, FL 32226 US

Certificate of Status Desired: No

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

## **Officer/Director Detail :**

Title	PRESIDENT	Title	D	
Name	RAINES, STEFANIE M	Name	MORENCY, NORMAND P	
Address	12226 GLENN HOLLOW DRIVE	Address	10719 HIGH RIDGE ROAD	
City-State-Zip:	JACKSONVILLE FL 32226	City-State-Zip:	JACKSONVILLE FL 32225	
Title	VP	Title	TD	
Name	MORENCY, CATHRYN L	Name	RAINES, TIMOTHY P	
Address	10719 HIGH RIDGE ROAD	Address	P.O.BOX 350194	
City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVILLE FL 32235	
		Title		
Title	SECRETARY	Title	DIRECTOR	
Name	BATEH, ANGELA	Name	BATEH, SAMUEL	
Address	86634 WORTHINGTON DRIVE	Address	86634 WORTHINGTON DRIVE	
City-State-Zip:	YULEE FL 32097	City-State-Zip:	YULEE FL 32097	

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

PRESIDENT

04/12/2013 Date

Electronic Signature of Signing Officer/Director Detail

FILED Apr 12, 2013 Secretary of State CC3258353994

Date