

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17104

**Entity Name:** GREATER ST. PAUL DAY CARE & ACADEMY, INC.**Current Principal Place of Business:**1130 N. WEBSTER AVENUE  
C/O REV. N.S. SANDERS  
LAKELAND, FL 33805**Current Mailing Address:**1130 N WEBSTER AVE  
LAKLAND, FL 33805**FEI Number:** 59-1958572**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NUNN, ISAAC  
1130 N. WEBSTER AVENUE  
LAKELAND, FL 33805 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:** ISAAC NUNN

03/06/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD
Name	SANDERS, N.S.
Address	942 LAKE DEESON POINTE
City-State-Zip:	LAKELAND FL 33805

Title	SECRETARY
Name	STILLS, ANGELA
Address	2815 HIGH VIEW BEND
City-State-Zip:	LAKELAND FL 33812

Title	D
Name	ROYSTER, DONALD SR.
Address	2009 BERRY RD
City-State-Zip:	PLANT CITY FL 33567

Title	D
Name	GRADDY, TIMOTHY
Address	3520 MILNER DR.
City-State-Zip:	LAKELAND FL 33810

Title	DIRECTOR
Name	MITCHELL, MARIE
Address	633 PONDEROSA DR. E
City-State-Zip:	LAKELAND FL 33810

*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:** GREATER ST. PAUL DAY/CARE ACADEMY

03/06/2023

Electronic Signature of Signing Officer/Director Detail

Date