Entity Name: ST.	JOHN'S ACADEMY PRIVATE SCHO	OL, INC.

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

1533 WILDWOOD DR SAINT AUGUSTINE, FL 32086

DOCUMENT# N9500002278

Current Mailing Address:

1533 WILDWOOD DR SAINT AUGUSTINE, FL 32086 US

FEI Number: 59-3317703

Name and Address of Current Registered Agent:

ANTHONY, MALCOLM P.A. 814 HWY A1A NORTH SUITE 105 PONTE VEDRA BEACH, FL 32082 US FILED Mar 17, 2020 Secretary of State 4147865816CC

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:

Address

4902 SHORE DRIVE

City-State-Zip: ST. AUGUSTINE FL 32086

Electronic Signature of Registered Agent

Officer/Director Detail :

Unicen/Direc	LIOI Delali .		
Title	PRESIDENT	Title	SECRETARY
Name	MITCHELL, JAMES	Name	TOWNE, JASON
Address	210 SIERRAS LOOP	Address	708 COACHMAN'S PLACE
City-State-Zip:	ST. AUGUSTINE FL 32086	City-State-Zip:	ST. AUGUSTINE FL 32086
Title	DIRECTOR	Title	DIRECTOR
Name	PILCHER, JEANNE	Name	SMITH, STACEY
Address	9890 PRESTON TRAIL W	Address	8515 C.R. 13 SOUTH
City-State-Zip:	PONTE VEDRA BEACH FL 32082	City-State-Zip:	HASTINGS FL 32145
Title	CEO	Title	VP
Name	BROOKS, WALLIS W.	Name	HAMILTON, JASON
Address	8015 PEBBLE CREEK LN E	Address	413 LEOTTA DRIVE
City-State-Zip:	PONTE VEDRA BEACH FL 32082	City-State-Zip:	ST. AUGUSTINE FL 32086
Title	DIRECTOR		
Name	COCHRAN, PHILIP		

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: WALLIS BROOKS	CEO	03/17/2020
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Electronic Signature of Signing Officer/Director Detail

Date