2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704203

FILED Apr 26, 2008 Secretary of State

Entity Name: THE EPISCOPAL CHURCH OF THE HOLY FAMILY, INCORPORATED

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
18501 N.W MIAMI, FL	/. 7TH AVE. 33169				
Current Mailing Address:			New Mailing Address:		
18501 N.W MIAMI, FL	/. 7TH AVE. 33169				
FEI Number:	: 59-0936172	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
13202 NW PEMBROK The above	11TH ST. (E PINES, FL		e purpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR		onic Signature of Registered A	gent gent	Date	
OFFICERS			_	TO TO OFFICERS AND DIDECTORS	
	J //II/ DII/E	31 0 103.	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D (BREWSTER, 9 7752 NW 18 S) Delete CAROL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Name: Address:	D (BREWSTER, 7752 NW 18 S PEMBROKE L) Delete CAROL STREET .AKES, FL 33024) Delete MAUREEN E	Title: Name: Address:		
Name: Address: City-St-Zip: Title: Name: Address:	D (BREWSTER, 7752 NW 18 SPEMBROKE LT (CAMPBELL, M21151 NE 2NE MIAMI, FL D (CHINYERE, C1461 NW 207) Delete CAROL STREET .AKES, FL 33024) Delete MAUREEN E D AVE.) Delete HUCKS	Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition	
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	D (BREWSTER, 7752 NW 18 SPEMBROKE LT (CAMPBELL, M21151 NE 2NE MIAMI, FL D (CHINYERE, C1461 NW 207 MIAMI GARDE) Delete CAROL STREET .AKES, FL 33024) Delete MAUREEN E D AVE.) Delete HUCKS STREET ENS, FL 33169) Delete ON DR.	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition () Change () Addition () Change () Addition (X) Change () Addition (AREN 51 TERRACE	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MAUREEN CAMPBELL T 04/26/2008