

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 31 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 733864 (3)
 1. Corporation Name
ST. COLUMBA'S EPISCOPAL CHURCH



Principal Place of Business 451 52ND STREET GULF MARATHON FL 33050 US	Mailing Address P.O. BOX 500426 MARATHON FL 33050 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 09/19/1975	4. FEI Number 59-2356874	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		

9. Name and Address of Current Registered Agent FRANKLIN D. GREENMAN, ESQ. 5800 OVERSEAS HIGHWAY SUITE 40 MARATHON FL 33050

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	P ☐ DELETE
NAME	JONES, LYNNE E.
STREET ADDRESS	1050 52ND STREET GULF
CITY-ST-ZIP	MARATHON FL
TITLE	VP ☒ DELETE
NAME	LANDWER, VIRGINIA B.
STREET ADDRESS	401 68TH ST., OCEAN
CITY-ST-ZIP	MARATHON FL
TITLE	D ☐ DELETE
NAME	LEWIS, LAWRENCE B.
STREET ADDRESS	201 ANGELES DR., SOUTH
CITY-ST-ZIP	MARATHON FL
TITLE	T ☒ DELETE
NAME	KLINGMAN, PATRICIA P.
STREET ADDRESS	11 BLUE ISLE BLVD
CITY-ST-ZIP	MARATHON, FL 00000
TITLE	D ☐ DELETE
NAME	MCDONALD, TED
STREET ADDRESS	50- 7TH STREET P.O. BOX 510608
CITY-ST-ZIP	KEY GLORY BEACH FL
TITLE	S ☐ DELETE
NAME	GOFF, JEAN
STREET ADDRESS	2000 COCO PLUM DRIVE #806
CITY-ST-ZIP	MARATHON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☒ Change ☒ Addition
2.2 NAME	VP Jackson, Margo
2.3 STREET ADDRESS	241 3rd St.
2.4 CITY-ST-ZIP	Key Colony Beach, FL 33051
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☒ Addition
4.2 NAME	Marriott, Pamela
4.3 STREET ADDRESS	350 Hth Street
4.4 CITY-ST-ZIP	Key Colony Bch, FL 33051
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	6000002474306
6.3 STREET ADDRESS	-04/01/98--01006--006
6.4 CITY-ST-ZIP	***61.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 3-12-98 (305) 743-6412

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