

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 13 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 739609 (6)
1. Corporation Name
ST. CHAD'S EPISCOPAL CHURCH OF TAMPA, FLORIDA, I NC.



Principal Place of Business Mailing Address
5609 NORTH ALBANY TAMPA FL 33603 5609 NORTH ALBANY TAMPA FL 33603

3. Date Incorporated or Qualified
07/07/1977

4. FEI Number 59-1761610 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

2. Principal Place of Business 2a. Mailing Address

21 Sulte, Apt. #, etc. 26 Sulte, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent
BERRY, ANITA R
3301 N PERRY AVE
TAMPA FL 33603

10. Name and Address of New Registered Agent

81 Name KEEBLER, RAYMOND E

82 Street Address (P.O. Box Number if Not Acceptable) 5609 N. ALBANY AVE

83

84 City TAMPA FL 85 Zip Code 33603

11. Pursuant to the provisions of Sections 617.0502 and 617.0503, 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 *Raymond E Keebler* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
T	LERUTSKY, DIONE	2918 W PARIS ST	TAMPA FL	<input type="checkbox"/>
D	BERRY, ANITA	3301 PERRY AVE.	TAMPA FL	<input checked="" type="checkbox"/>
AT	COMFORT, RUTH	6306 MEMORIAL HWY	TAMPA FL	<input checked="" type="checkbox"/>
SD	LEE, DONNA	2811 W KIRBY STREET	TAMPA, FL 00000	<input checked="" type="checkbox"/>
D	RIVERA, ISHMAEL	3201 W OSBORN AVENUE	TAMPA FL	<input checked="" type="checkbox"/>
D	WINTERS, JAYNE	3420 A CARLTON ARMS CIRCLE	TAMPA FL	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
T	LEVITSKY, DIANE		33614	<input checked="" type="checkbox"/>
D	KEEBLER, RAYMOND E	4709 WANDERING WAY	TAMPA FL 33624	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D	CALLIHAM, CAROL	5113 LINCOLN AVE N	TAMPA FL 33614	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D	DRAKE, MARILYN	4717 BAY VISTA AVE	TAMPA FL 33611	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D	HUFFMAN, HELEN	1711 RIO VISTA AVE W	TAMPA FL 33608	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
D	JORDAN, JEROLINE	3403 KNOLLWOOD, ST E	TAMPA FL 33610	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: *Raymond E Keebler*

CR2E037 (10/97)