## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#765311** 

FILED Mar 29, 2004 Secretary of State

Entity Name: THE EPISCOPAL RETREAT AND CONFERENCE CENTER, DIOCESE OF CENTRAL FLORIDA, INC.

**Current Principal Place of Business: New Principal Place of Business:** DIOCESE OF CENTRAL FLORDIA, INC 1601 ALAFAYA TRAIL OVIEDO, FL 32765 **New Mailing Address: Current Mailing Address:** DIOCESE OF CENTRAL FLORIDA, INC 1601 ALAFAYA TRAIL OVIEDO, FL 32765 FEI Number: 59-2227052 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: MC QUEEN, PAUL D. 1601 ALFAYA TRAIL OVIEDO, FL 32765 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete HAYNIE, MARTHA Name: Name: 4117 FLORALWOOD COURT Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: PD Title: PD (X) Change ( ) Addition ( ) Delete Name: TEW, BUTCH Name: HOLLAND, DAVID Address: 1015 LANCASTER DR. Address: 877 BLOCK STREET City-St-Zip: ORLANDO, FL 32806 City-St-Zip: WINTER PARK, FL 32789 Title: VD () Delete Title: VD. (X) Change ( ) Addition HOLLAND, DAVID PIANTIERI, LINDA Name: Name: Address: 877 BLOCK ST Address: 570 OSCEOLA AVE City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: ORLANDO, FL 32801 ( ) Change (X) Addition ( ) Delete Title: Title: SD Name: Name: LANG, TOM 816 SUMMERLIN AVE. Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32806

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID HOLLAND PD 03/29/2004