

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N17185** (2)
1. Corporation Name
ST. JOSEPH'S EPISCOPAL CHURCH OF LEE COUNTY, INC

Principal Place of Business 18800 ALLAIRE LANE FT MYERS FL 33908-1828	Mailing Address 19800 ALLAIRE LANE FT MYERS FL 33908-1828
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3. Date Incorporated or Qualified

10/08/1986

4. FEI Number

59-2765787

Applied For
Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	25
29	30

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

10. Name and Address of New Registered Agent

**CARTER, VIRGINIA
18367 USEPPA RD
FT. MYERS FL 33912**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Virginia E. Carter

(NOTE: Registered Agent signature required when reinstating)

4/21/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	M	☐ DELETE
NAME	SCHARF JR, FREDERICK E	
STREET ADDRESS	22844 WESTBRIDGE CT	
CITY-ST-ZIP	ESTERO FL	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

TITLE	D	☐ DELETE
NAME	JOHNSON, CURTIS	
STREET ADDRESS	12804 KEDLESTON CIR	
CITY-ST-ZIP	FORT MYERS FL	

2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

TITLE	D	☐ DELETE
NAME	ANDERSON, NORMA	
STREET ADDRESS	18114 MATANZAS	
CITY-ST-ZIP	FORT MYERS FL	

3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

TITLE	DT	☐ DELETE
NAME	WASHBURN, DAVID	
STREET ADDRESS	12801 CHARTWELL DR	
CITY-ST-ZIP	FORT MYERS FL	

4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

TITLE	DS	☐ DELETE
NAME	KIBBEY, KEITH	
STREET ADDRESS	18508 EAST SHORE DR	
CITY-ST-ZIP	FORT MYERS FL	

5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

TITLE	D	☐ DELETE
NAME	M McNALLY, MADGE	
STREET ADDRESS	7570 GARRY ROAD	
CITY-ST-ZIP	FORT MYERS FL	

6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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:

David C. Wake

4/20/98

CR2E037 (1097)