2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2009
Secretary of State

DOCUMENT# N40206

Entity Name: ST. PAUL'S BY-THE-SEA EPISCOPAL CHURCH FOUNDATION, INC.

Current Principal Place of Business:

465 ELEVENTH AVE N
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

465 ELEVENTH AVE N
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-3037134 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PFAB, PENNY
465 11TH AVENUE NORTH
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

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:

Title: D ( ) Delete
Name: COSTON, MIKE
Address: 465 11TH AVE N
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: TD ( ) Delete
Name: TAYLOR, JACK
Address: 465 11TH AVE N
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D ( ) Delete
Name: DOWNS, HARRY
Address: 465 11TH AVE N
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D ( ) Delete
Name: GRINSTEAD, CHARLIE
Address: 465 11TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: GRINSTEAD, CHARLES
Address: 465 11TH AVE N
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: TD (X) Change ( ) Addition
Name: COSTON, MIKE
Address: 465 11TH AVE N
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: SD (X) Change ( ) Addition
Name: ROBERTS, SARA
Address: 465 11TH AVE N
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D (X) Change ( ) Addition
Name: BYERS, RICHARD
Address: 465 11TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D ( ) Change (X) Addition
Name: SCHIFANELLA, THOMAS
Address: 465 11TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D ( ) Change (X) Addition
Name: PFAB, PENNY
Address: 465 11TH AVENUE NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: CHARLES GRINSTEAD PD 02/25/2009

Electronic Signature of Signing Officer or Director — Date