FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name N41919

(4)

ALL SOULS EPISCOPAL CHURCH, INC.

Principal Place of Business Mailing Address								- I TOURIAL EN OUDDA LIGHT FORDI HIGHE FOLDI ENERL OUDIN OPDAY BARIN EREN ANENE FROM				
14840 N CLEVELAND AVE NORTH FORT MYERS FL 33903 US 14640 N CLEVELAND AVE NORTH FORT MYERS FL 33 US						06						
								3. Date Incorporated or Qualified 02/04/1991	3a. Date of Last Report 01/23/1996			
2. Princ 21	Principal Place of Business			2a. Mailing Address 26				4. FEI Number NOT APPLICABLE	<u> </u>	Applied For Not Applicable		
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1 '	\$8.75 Additional Fee Required		
City & State			28	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	25		29	9 30		untry		8. This corporation has liability for intangible tay un- Florida Statutes			. 199.032,	
Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent				
							Name					
MYCOFF, WALTER J., JR. 16870 3RD ST						82 Str	eet Addre	Idress (P.O. Box Number is Not Acceptable)				
NORTH FORT MYERS FL 33917						83						
						84 City 85 Zip Co					Cryle	
						i i '			FL I			
I QTIII	ce or registered ac	ions of Sections 617.06 gent, or both, in the Sta lth, and accept the obli	te of Florid	ia. Such change wa	as authorize	d by the	ned corp corporati	oration submits this statement for the pion's board of directors. I hereby accept	urpose of char at the appointm	nging it nent as	s registered registered	
		in, and accept the obi	igalions of	Section 617.0303,	riuriua Sta	itutes.						
SIGNAT	Signature, lypec	or printed name of registered a	agent and tille i	f applicable. (f	NOTE Register	ed Agent sign	ature require	ed when reinstating)	DATE			
12.		OFFICERS A	ND DIREC		13.			ADDITIONS/CHANGES TO OFFICE	ERS AND DIR	ECTOR	S IN 12	
TITLE	0			☐ DELETE	1.1 1	ITLE				Change	Addition	
NAME	17,100,11,101,111,111,111,111,111,111,11				1.2 NAME							
STREET AD	STREET ADDRESS 16870 3RD STREET					1.3 STREET ADDRESS						
CITY-ST-7		FORT MYERS FL			1.4 (ITY-ST-ZIP		917				
TITLE	D			X DELETE	2.1 1	ITLE	D			Change	Addition X	
NAME	PHILLIPS, ROBERT				2.2 NAME			rber, Alan G.				
STREET AD	et address 2023 SE 13TH ST				2.3 STREET			27 Macon Circle				
CITY-ST-7				141				rth Fort Myers FL 339				
TITLE	D			₩ DELETE	3.1 1		D ₋	5	U	Change	Addition	
NAME	BLANCHETTE, BETTY				3.2 NAME			hnson, Jim				
	et address 1652 N. Tamiami Trail -si-zip N. Ft. Myers Fl							37 Swan Terrace				
CITY-ST-Z	-	NICHO PL		DELETE		CITY-ST-ZIP	NO:	rth Fort Myers FL 339			101 4 100	
1	CHAMO	EDITAL CADIMOOD		☐ DECEIE	4.1 T				السا	Change	K Addition	
NAME		ERLIN, GARWOOD				NAME						
-	IREET ADDRESS 5516 SAN LUIS DR. NY-ST-ZIP N. FT. MYERS FL				4.3 STREET ADDRESS 4.4 CITY-ST-ZIP			903				
TITLE	S	TILIO IL		☐ DELETE	4.4 C		33	703		Change	Addition	
NAME	1 -	AGNER, ARLYN				IAME			ш,	лыцч	Tig vanimin	
STREET AD		TULIP RD				iame Treet addre	ec					
CITY-ST-Z		AYERS FL						912				
TITLE	10111 R	TIETT I		☐ DELETE	5.4 L 6.1 T	ITY-ST-ZIP ITLE	33	J 1 60		Change	Addition	
NAME						IAME		•				
STREET AD	DRESS					TREET ADORE	22					
					0.3 3	WILL VERNE	·					

14. I do 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 of the receiver or frustee 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, of on an attendment with an address. Sarwood Chamberlin, Treasurer SIGNATURE

6.4 CITY - ST - ZIP