2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41919

FILED Jaņ 30, 2<u>00</u>6 Secretary of State

Entity Name: ALL SOULS EPISCOPAL CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

14640 N CLEVELAND AVE

NORTH FORT MYERS, FL 33903 US

Current Mailing Address: New Mailing Address:

14640 N CLEVELAND AVE

NORTH FORT MYERS, FL 33903 US

FEI Number: 65-0151247 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:

EVANS, V. CREIGHTON JR 1226 SW 1ST AVENUE CAPE CORAL, FL 33991 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete CRAFT, JAMES D SPAINHOWER, MARQUIS O Name: Name: 2113 N.E. 14TH PLACE Address: 14505 CONSTITUTION WAY Address: City-St-Zip: CAPE CORAL, FL 33909 City-St-Zip: N FT MYERS, FL 33917

Title: () Delete Title: (X) Change () Addition

JAMISON, ANDREW Name: CAROL, WALKER Name: Address: 16150 BAY POINT BLVD B-102 Address: 6786 WOLF RUN LANE City-St-Zip: N FORT MYERS, FL 33917 City-St-Zip: N FORT MYERS, FL 33917

Title: () Delete Title: () Change () Addition

JOHNSON, JIM Name: Name: 950 MOODY RD. UNIT 119 Address: Address: City-St-Zip: N FORT MYERS, FL 33903 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: JAMISON, JUNE Name: 16150 BAY PONT BLVD B-102 Address: Address: City-St-Zip: N FORT MYERS, FL 33917 City-St-Zip:

Title: () Delete Title: () Change () Addition

EVANS, CREIGHTON REV Name: Name: 126 SW 1ST AVENUE Address: Address: City-St-Zip: CAPE CORAL, FL 33991 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

HIGGINS. PATRICIA A KELLY, BARBARA M Name: Name: Address: 9914 TARPON KEY COURT Address: 5341 SW 9TH PLACE FORT MYERS, FL 33905 CAPE CORAL, FL 33914 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BARBARA M KELLY **TREA** 01/30/2006