2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004569

Entity Name: ST. MONICA'S EPISCOPAL CHURCH, INC.

FILED Apr 29, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
7070 IMMOKALEE RD NAPLES, FL 341198845 US					
Current Mailing Address:			New Mailir	New Mailing Address:	
7070 IMMOKALEE RD NAPLES, FL 339998907 US					
FEI Number: 65-0295252 FEI Number Applied For () FEI Nu		FEI Number Not Appli	cable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	FF, KATHRYN KALA ROAD L 34119 US	_			
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:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () BODINSKI, BON 14809 FRIPP IS NAPLES, FL 34	LAND CT	Title: Name: Address: City-St-Zip:	D (X) Change () Addition BODINSKI, BONNIE 3225 5TH AVENUE NW NAPLES, FL 34120	
Title: Name: Address: City-St-Zip:	D () BODLEY, ERIC 9251 CEDARCR BONITA SPRING		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () RICHARDS, WIL 2780 12TH AVE NAPLES, FL 34	NE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ROSSOMANDO, 4641 FIFTH AVE NAPLES, FL 34	NW	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () LIETZ, CLAY 171 PERKINS D NAPLES, FL 34		Title: Name: Address: City-St-Zip:	D (X) Change () Addition SMITH, WHITNEY 14524 STERLING OAKS DRIVE NAPLES, FL 34110	
Title: Name: Address: City-St-Zip:	D () LIEB, TED ST TRUPEZ 110 NAPLES, FL 34		Title: Name: Address: City-St-Zip:	D (X) Change () Addition MISENER, CHRISTINE 4652 RIO POCO CT NAPLES, FL 34109	

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: BONNIE BODINSKI D 04/29/2006