

FILE NOW: FILING FEE IS \$61.25

FILED
Feb 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **771125** (2)
1. Corporation Name
CHRIST EPISCOPAL CHURCH OF PONTE VEDRA BEACH CHARITABLE FOUNDATION, INC.



Principal Place of Business 400 SAN JUAN DRIVE BOX #56 PONTE VEDRA BEACH FL 32082	Mailing Address 400 SAN JUAN DRIVE BOX #56 PONTE VEDRA BEACH FL 32082-2821
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3. Date Incorporated or Qualified 11/07/1983	3a. Date of Last Report 02/09/1996
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2. Principal Place of Business 21 400 San Juan Dr. Suite, Apt. #, etc.	2a. Mailing Address 26 P.O. Box 1558 Suite, Apt. #, etc.	4. FEI Number 59-0806965	Applied For <input type="checkbox"/> Not Applicable
22	27	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Ponte Vedra Beach City & State	28 Ponte Vedra Beach City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 32082 Zip	25 St. Johns Country	29 32082 Zip	30 St. Johns Country

9. Name and Address of Current Registered Agent COOPER, JAMES H. 1314 PONTE VEDRA BLVD PONTE VEDRA BEACH FL 32082	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HEAMON, JOHN W.	1.2 NAME	
STREET ADDRESS	3279 OLD BARN RD., W. PONTE VEDRA BCH FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P ARMSTRONG, PARKER B.	2.2 NAME	
STREET ADDRESS	30 LAKE JULIADRIIVE SOUTH PONTE VEDRA BCH FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S MCDEVITT, LES	3.2 NAME	
STREET ADDRESS	209 SETTLERS ROW NORTH PONTE VERDA BEACH FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D MASON, PAUL C.	4.2 NAME	
STREET ADDRESS	7470 FOUNDERS WAY PONTE VEDRA BCH FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D HENDERSON, WILLIAM E	5.2 NAME	
STREET ADDRESS	352 SAN JUAN DRIVE PONTE VEDRA BEACH FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DC COOPER, JAMES	6.2 NAME	
STREET ADDRESS	1314 PONTE VEDRA BLVD PONTE VEDRA BCH FL	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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 *John W. Heamon* **John W. Heamon** **02/10/97** **285-6127** **(904)**

CR2E037 (9/96)