FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1000

2. Principal Place of Business

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DOCUMENT #	771125	(2)	
CHRIST EPISCOPAL RITABLE FOUNDATK	ON, INC.		
Principal Place of Business 400 SAN JUAN DR PONTE VEDRA BEACH FL 32082 US	Mailing Address PO BOX 1558 PONTE VEDRA BEACH FL 32009 US		3. Date Incorporated or Qualified 11/07/1983
00	00		4. FEI Number 59- Applied For
			89:080636 \$ 2634796 Not Applicable

2a. Mailing Address

5. Certificate of Status Desired Fee Required 21 \$5.00 May Be Sulte, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing 22 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? ☐ No Yes Yes 23 28 Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent COOPER, JAMES H. Street Address (P.O. Box Number is Not Acceptable) 1314 PONTE VEDRA BLVD 83 PONTE VEDRA BEACH FL 32082

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 tamiliar with and accept the obligations of Section 617.0503, Florida Statutes.

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SIGNATURE .	Signature, proof or printed name of registered agent and little If apply	ner.	teoletanad Appal pigastura	required when reinstaling) DATE		
12.	OFFICERS AND DIRECTORS	NOTE: A	13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR:	S IN 12
TITLE 1	T OTTIGETION AND DIFFEOTONS	DELETE	1.1 TOTLE	7.0011101107011111021107111	Change	Addition
NAME	HEAMON, JOHN W.		1.2 NAME			
	3279 OLD BARN RD., W.					
STREET ADDRESS			1.3 STREET ADDRESS			
CITY-ST-ZIP	PONTE VEDRA BCH FL	DELETE	1.4 CITY - ST - ZIP		Change	Addition
TITLE	r	N DETE IE	2.1 TITLE	lst Vice President ${oldsymbol D}$	C CHRING	Addition
NAME	ARMSTRONG, PARKER B.		2.2 NAME	Marvin Thomas Benson		
STREET ADDRESS	30 LAKE JULIADRIVE SOUTH		2.3 STREET ADDRESS	125 Glen Cove Place		
CITY-ST-ZIP	PONTE VEDRA BCH FL		2. 4 CITY-ST-ZIP	Ponte Vedra Beach, Ri	32082	
TITLE	8	DELETE	3.1 TITLE	Secretary S	Change	Addition
NAME	MCDEVITT, LES		3.2 NAME	Elizabeth L. Harther		
STREET ADDRESS	209 SETTLERS ROW NORTH		3.3 STREET ADDRESS	118 Lake Julia Drive No	orth	
CITY-ST-ZIP	PONTE VERDA BEACH FL		3.4. CITY-ST-ZIP	Ponte Vedra Beach, FL	32082	
TITLE	D	X DELETE	4.1 TITLE	vice President Devel	Change	X Addition
NAME	MASON, PAUL C.		4. 2 NAME	Neil Crawford		
STREET ADDRESS	7470 FOUNDERS WAY		4.3 STREET ADDRESS	539 Lake Road		
CITY-ST-ZIP	PONTE VEDRA BCH FL		4.4 CITY - ST - ZIP	Ponte Vedra Beach, FL	32082	
TITLE	→ ₹	DELETE	5.1 TITLE	President	Change	☐ Addition
NAME	HENDÈRSON, WILLIAM E		5.2 NAME			
STREET ADDRESS	352 SAN JUAN DRIVE		5.3 STREET ADDRESS			
CITY-ST-ZIP	PONTE VEDRA BEACH FL		5.4 CITY - ST - ZIP			
TITLE	DC .	DELETE	6.1 TITLE		Change	Addition
NAME	COOPER, JAMES		6.2 NAME			
STREET ADDRESS	1314 PONTE VEDRA BLVD		6.3 STREET ADDRESS			ļ
City-St-ZiP	PONTE VEDRA BCH FL		6.4 CITY-ST-ZIP]

6.4 CITY-ST-ZIP 14. I 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 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 chapted, or on an attachment with an address.

liplas 15 Cal 111 (1) 1.1

FILED

Mar 13 1998 8:00am

Secretary of State

\$8.75 Additional

Zip Code