

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 701320

1. Entity Name

SAINT MARY MAGDALENE EPISCOPAL CHURCH, INC.

FILED
Mar 10, 2000 8:00 am
Secretary of State

03-10-2000 90024 020 ****61.25

Principal Place of Business

1400 RIVERSIDE DRIVE
CORAL SPRINGS FL 33071

Mailing Address

1400 RIVERSIDE DRIVE
CORAL SPRINGS FL 33071-6070

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

-Suite, Apt. #, etc.-

City & State

City & State

4. FEI Number

59-6500406

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EICHLER, STEPHEN (REV.)
1400 RIVERSIDE DRIVE
CORAL SPRINGS FL 33071

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Delete
NAME VD
STREET ADDRESS HERNANDEZ, ANTHONY
CITY-ST-ZIP 1139 NW 116 AVE
CORAL SPGS FL 33071

TITLE ☒ Change ☐ Addition
NAME William Brady
STREET ADDRESS 1496 Avon Lane
CITY-ST-ZIP No. Cauderdale, FL 33068

TITLE ☒ Delete
NAME MARTIN, RICHARD
STREET ADDRESS 9921 TWIN LAKES DRIVE
CITY-ST-ZIP CORAL SPRINGS, FL 0

TITLE ☒ Change ☐ Addition
NAME Jack Murry
STREET ADDRESS 10604 NW 48 ST
CITY-ST-ZIP Coral Springs, FL 33076

TITLE ☒ Delete
NAME PD
STREET ADDRESS GRAHAM, ERNST-JONES
CITY-ST-ZIP 10346 NW 16 CT
CORAL SPRINGS FL

TITLE ☒ Change ☐ Addition
NAME PD
STREET ADDRESS Daniel Tantimonaco
CITY-ST-ZIP 8095 NW 71 CT
Tamarac, FL 33321

TITLE ☐ Delete
NAME C
STREET ADDRESS EICHLER, STEPHEN (REV.)
CITY-ST-ZIP 1400 RIVERSIDE DRIVE
CORAL SPRINGS FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephen Eichler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-7-00 954 753 1400

CR2E037 (9/99)