2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700424

Entity Name: ST. THOMAS' EPISCOPAL CHURCH

FILED Apr 20, 2007 Secretary of State

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

1200 SNELL ISLE BLVD., N.E. US SAINT PETERSBURG, FL 33704

Current Mailing Address: New Mailing Address:

1200 SNELL ISLE BLVD., N.E. SAINT PETERSBURG, FL 33704 US

FEI Number: 59-0895914 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:

RECTOR, WARDEN & VESTRY OF CHURCH ASSISTANTRECTOR, WARDEN & VESTRY OF CHURCH

1200 SNÉLL ISLE BLVD. 1200 SNELL ISLE BLVD

SAINT PETERSBURG, FL 33704 US SAINT PETERSBURG, FL 33704 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: JOHN C. SUHAR 04/20/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

MCLEAN, W. D III SUHAR, JOHN C Name: Name: 100 BAY POINT DR., N.E. Address: 771 34TH AVENUE NORTH Address: City-St-Zip: ST. PETERSBURG, FL City-St-Zip: ST. PETERSBURG, FL 33704

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

DAY, JOHN W Name: DISLER, DODD Name: Address: 1397 EDEN ISLE BLVD NE Address: 446 15TH AVENUE NE

City-St-Zip: SAINT PETERSBURG, FL 33704 City-St-Zip: SAINT PETERSBURG, FL 33704

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

HANNA, SUE MALMAD, SUE Name: Name: 902 MARCO DR. NE ST. Address: Address: 1315 74TH CIRCLE NE

City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip: SAINT PETERSBURG, FL 33702

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

Name: SHEVLIN, THOMAS L Name: STILES, SCOTT

Address:

6636 BAYOU GRANDE BLVD NE 4090 14TH LANE NE Address: City-St-Zip: SAINT PETERSBURG, FL 33703 City-St-Zip: SAINT PETERSBURG, FL 33702

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: JOHN C SUHAR PD 04/20/2007