

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707653

FILED
Jun 17, 2008
Secretary of State

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

Current Principal Place of Business:

14260 OLD CUTLER ROAD
MIAMI, FL 33158

New Principal Place of Business:

Current Mailing Address:

14260 OLD CUTLER ROAD
MIAMI, FL 33158

New Mailing Address:

FEI Number: 23-7273769 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GAEBE, JOHN
3211 PONCE DE LEON BLVD
SUITE 201
CORAL GABLES, FL 33134 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:

Title: P () Delete
Name: VERELL, GARY A
Address: 917 EASTRIDGE VILLAGE DRIVE
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: GAEBE, JOHN
Address: 5870 S.W. 96 STREET
City-St-Zip: MIAMI, FL 33156

Title: T () Delete
Name: HEMINGWAY, WILLIAM
Address: 7950 SW 165 ST
City-St-Zip: MIAMI, FL 33157

Title: S () Delete
Name: BROWNING, ELLEN
Address: 8440 SW 162 TERR
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: WILLIAMS, PATRICIA I
Address: 8620 SW 182 STREET
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: WIEGERT, MICHAEL
Address: 16202 SW 87 CT
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: GARY A. VERELL

P

06/17/2008

Electronic Signature of Signing Officer or Director

Date