#### 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 701321** 

Entity Name: SAINT BENEDICT'S EPISCOPAL CHURCH, INC.

**FILED** Feb 22, 2023 **Secretary of State** 4402643994CC

# **Current Principal Place of Business:**

7801 N.W. 5TH ST. PLANTATION, FL 33324

## **Current Mailing Address:**

7801 N.W. 5TH ST.

PLANTATION, FL 33324 US

FEI Number: 59-1426297 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

CUTIE, ALBERT R. 7801 N.W. 5TH ST. PLANTATION, FL 33324 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: ALBERT CUTIE 02/22/2023

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title Title

DOUGLAS, DWIGHT PLUMMER, WINSTON Name Name **543 NW 98 AVENUE** 9410 NW 31 PLACE Address Address

City-State-Zip: SUNRISE FL 33351-7159 PLANTATION FL 33325 City-State-Zip:

Title D Title D

Name FAULSTICK, CHERYL Name NEWTON, IVERTON

Address 1510 NORTH TRAFALGAR CIRCLE Address 900 ST. CHARLES PLACE, APT. 402

HOLLYWOOD FL 33020 City-State-Zip: PEMBROKE PINES FL 33026 City-State-Zip:

Title Title D

Name KELLEY, ALICIA Name **DUNMIRE. JAMES** Address 6801 SW 11 STREET 707 SW 9 AVE Address City-State-Zip: PLANTATION FL 33317

City-State-Zip: FORT LAUDERDALE FL 33315

Title Title

CONSUEGRA, SOLOMON Name AMIREH, ISAM Name

Address 361 E. SHERIDAN STREET 29 CHESTNUT CIRCLE Address

COOPER CITY FL 33028 City-State-Zip: DANIA FL 33004 City-State-Zip:

# Continues on page 2

I hereby 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 all other like empowered.

02/22/2023 SIGNATURE: WINSTON PLUMMER SENIOR WARDEN

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title D

Name LEWIS, MICHAEL Name MASON, PATRICIA
Address 13102 NW 11TH STREET Address 1000 SW 52 AVE

City-State-Zip: PEMBROKE PINES FL 33028 City-State-Zip: PLANTATION FL 33317

Title D Title

Name MCKENZIE-CHAMBERS, FAY Name RICKETTS-WELLER, SATNARINE

Address 10307 NW 6 STREET Address 10300 NW 30 CT

City-State-Zip: PLANTATION FL 33317

BUILDING 168, APT 104

City-State-Zip: PLANTATION FL 33317

City-State-Zip: PLANTATION FL 33317 City-State-Zip: SUNRISE FL 33322

Title D Title DIRECTOR

 Name
 WALFORD, KEVIN
 Name
 MICHAEL WILLIAMS

 Address
 920 SE 16 CT
 Address
 111 SW 128 AVE

City-State-Zip: DEERFIELD BEACH FL 33441 City-State-Zip: PLANTATION FL 33325

Title DIRECTOR Title DIRECTOR

NameJOSE CALDERONNameSTEPHANIE FRANCISAddress5017 HERON PLACEAddress391 W, LAKE DASHA DR.

City-State-Zip: COCONUT CREEK FL 33073 City-State-Zip: PLANTATION FL 33324