

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 701321

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

02/09/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name DOUGLAS, DWIGHT  
Address 543 NW 98 AVENUE  
City-State-Zip: PLANTATION FL 33325

Title D  
Name PLUMMER, WINSTON  
Address 9410 NW 31 PLACE  
City-State-Zip: SUNRISE FL 33351-7159

Title D  
Name NEWTON, IVERTON  
Address 900 ST. CHARLES PLACE, APT. 402  
City-State-Zip: PEMBROKE PINES FL 33026

Title D  
Name SIMON, SHEENA  
Address 3361 NW 47 TERRACE  
APT 428  
City-State-Zip: LAUDERDALE LAKES FL 33319

Title D  
Name FAULSTICK, CHERYL  
Address 1510 NORTH TRAFALGAR CIRCLE  
City-State-Zip: HOLLYWOOD FL 33020

Title D  
Name MOON, KATHLEEN  
Address 6551 NW 9TH STREET  
City-State-Zip: PLANTATION FL 33317

Title D  
Name THOMAS, GODFREY  
Address 5902 NW 71 AVE  
City-State-Zip: TAMARAC FL 33321

Title D  
Name FACEY, ANDREA  
Address 7510 NW 66 TERRACE  
City-State-Zip: TAMARAC FL 33321

**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.*

**SIGNATURE:** WINSTON PLUMMER**DIRECTOR**

02/09/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name VAZ, ASHLEY  
Address 8005 NW 100 TERRACE  
City-State-Zip: TAMARAC FL 33321

Title D  
Name BROWNE, ROGER DR.  
Address 375 CLANCEY CIRCLE  
City-State-Zip: MARGATE FL 33068

Title D  
Name DUNMIRE, JAMES  
Address 707 SW 9 AVE  
City-State-Zip: FORT LAUDERDALE FL 33315

Title D  
Name KELLEY, ALICIA  
Address 6801 SW 11 STREET  
City-State-Zip: PLANTATION FL 33317

Title D  
Name MCDONALD, JACQUELINE  
Address 8769 NW 38 STREET, APT. 113  
City-State-Zip: SUNRISE FL 33351

Title D  
Name HARRIS, LARRY  
Address 2950-2 E. ARAGON BLVD  
City-State-Zip: SUNRISE FL 33313

Title D  
Name FACEY, ANDREA  
Address 7510 NW 66 TERRACE  
City-State-Zip: TAMARAC FL 33321