

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735969

Entity Name: THE EPISCOPAL CHURCH OF ST. BEDE, INC.**Current Principal Place of Business:**2500 - 16TH STREET NORTH
ST. PETERSBURG, FL 33704**Current Mailing Address:**2500 - 16TH STREET NORTH
ST. PETERSBURG, FL 33704 UN**FEI Number:** 59-0830736**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CFRA, LLC
100 S ASHLEY DR STE 400
TAMPA, FL 33602 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:** JOEL B. GILES

04/23/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SENIOR WARDEN
Name MORGAN, GEORGE
Address 7400 10TH ST N
City-State-Zip: ST PETERSBURG FL 33702

Title OFFICER
Name TUCKER, TOM
Address 5840 62ND ST N
City-State-Zip: ST. PETERSBURG FL 33709

Title SENIOR WARDEN
Name GREGORY, SANDY
Address 136 45TH AVE NE
City-State-Zip: ST PETERSBURG FL 33702

Title TREASURER
Name GILES, JOEL B
Address 626 17TH AVE NE
City-State-Zip: ST. PETERSBURG FL 33704

Title OFFICER
Name RICH, JENNIFER
Address 7464 MEADOWLAWN DR N
City-State-Zip: ST. PETERSBURG FL 33702

Title OFFICER
Name PETERSON, JON
Address 4023 2ND AVE N
City-State-Zip: ST. PETERSBURG FL 33713

Title OFFICER
Name ROTHMANN, LINDA
Address 4485 1ST STREET NE
#219
City-State-Zip: ST. PETERSBURG FL 33703

Title OFFICER
Name MOONEY, SHERI
Address 7250 14TH ST N
City-State-Zip: ST. PETERSBURG FL 33702

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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: JOEL GILES

TREASURER

04/23/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name WALKER, DON
Address 721 26TH AVE N
City-State-Zip: ST. PETERSBURG FL 33704

Title OFFICER
Name TYLER, JOE
Address 1318 35TH STREET NORTH
City-State-Zip: ST. PETERSBURG FL 33713

Title JUNIOR WARDEN
Name MORSE, STEPHEN
Address 7464 MEADOWLAWN DRIVE NORTH
City-State-Zip: ST. PETERSBURG FL 33702

Title OFFICER
Name GIESEY, CATHY
Address 7500 ORPINE DRIVE NORTH
City-State-Zip: ST. PETERSBURG FL 33702