

2021 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:**CF REGISTERED AGENT, INC.
100 S. ASHLEY DRIVE
SUITE 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

03/11/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name LIGHTFOOT, SANDYE
Address 1863 75TH AVENUE N
City-State-Zip: ST. PETERSBURG FL 33702

Title TREASURER
Name SPRAGUE, PAUL J
Address 3535 WOODRIDGE PLACE
City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR, JUNIOR WARDEN
Name PORTER, JACKIE
Address 2321 PINE TREE TERRACE
City-State-Zip: PALM HARBOR FL 34683

Title DIRECTOR
Name REYES, BETH DELOS
Address 11200 102ND AVENUE N
#34
City-State-Zip: SEMINOLE FL 33778

Title DIRECTOR
Name WILLIAMS, JOYCE
Address 31268 STONEY BROOK DRIVE
City-State-Zip: BROOKSVILLE FL 34602

Title DIRECTOR, SENIOR WARDEN
Name ROTHMANN, LINDA M.
Address 4885 1ST STREET NE
UNIT 219
City-State-Zip: ST PETERSBURG FL 33703

Title DIRECTOR
Name GREGORY, SANDRA
Address 136 45TH AVENUE N
City-State-Zip: ST. PETERSBURG FL 33703

Title DIRECTOR
Name MAYNARD, CLAUDIA
Address 579 LEWIS BLVD SE
City-State-Zip: ST PETERSBURG FL 33705

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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: LINDA M. ROTHMANN**SENIOR WARDEN**

03/11/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CODDINGTON, DAVID
Address 2320 43RD AVENUE N
City-State-Zip: ST. PETERSBURG FL 33714

Title CLERK
Name LONDON, ROSE
Address 2240 BELLAIR ROAD
 SUITE 190
City-State-Zip: CLEARWATER FL 33764

Title DIRECTOR
Name MOONEY, SHERRI
Address 7250 14TH STREET N
City-State-Zip: ST. PETERSBURG FL 33702