

**2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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

10/08/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

Title SECRETARY  
Name HICKS, VANESSA  
Address 1605 27TH AVENUE N  
City-State-Zip: ST PETERSBURG FL 33713

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

Title DIRECTOR  
Name CALLAHAN, LANA  
Address 5226 18TH STREET NORTH  
City-State-Zip: ST. PETERSBURG FL 33714

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

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

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

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

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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 B. GILES

**DIRECTOR**

10/08/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	REX, NANCY
Address	2013 3RD STREET SOUTH
City-State-Zip:	ST. PETERSBURG FL 33705