

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000009547

**FILED  
Feb 02, 2017  
Secretary of State  
CC6074147404**

**Entity Name:** THE CHARISMATIC EPISCOPAL CHURCH DIOCESE OF FLORIDA, INC.

**Current Principal Place of Business:**

6701 SW 25TH ST.  
MIRIMAR, FL 33023

**Current Mailing Address:**

6701 S W 25 ST  
MIRAMAR, FL 33023

**FEI Number: 20-3489838**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PAYSINGER, KEVIN B  
1710 SHADOWOOD LANE STE 210  
JACKSONVILLE, FL 32207 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name SIMPSON, DAVID R  
Address 6701 SW 25TH ST.  
City-State-Zip: MIRIMAR FL 33023

Title D  
Name PAYSINGER, DAVID  
Address P.O. BOX 8608  
City-State-Zip: JACKSONVILLE FL 32239

Title D  
Name NILON, JAMES  
Address 1661 ARCADIA AVENUE  
City-State-Zip: SARASOTA FL 34232

Title D  
Name WALES, DREW  
Address 854 CARDINAL AVENUE  
City-State-Zip: ROCKLEDGE FL 32955

*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: DAVID R. SIMPSON**

**PD**

**02/02/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date