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Mar 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 704203 (9)

1. Corporation Name

THE EPISCOPAL CHURCH OF THE HOLY FAMILY, INCORPORATED



Principal Place of Business

Mailing Address

18501 N.W. 7TH AVE.
MIAMI FL 33169

18501 N.W. 7TH AVE.
MIAMI FL 33169-4441

3. Date Incorporated or Qualified
06/20/1962

3a. Date of Last Report
01/24/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
59-0936172

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WARD, REV. HORACE D
580 N.W. 194TH TERRACE
MIAMI FL 33169

81 Name

The Rev. Horace D. Ward

82 Street Address (P.O. Box Number is Not Acceptable)

83 9830 S.W. 13th Court

84 City

Pembroke Pines

FL

85 Zip Code
33026

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Horace D. Ward

(NOTE: Registered Agent signature required when reinstating)

DATE

3/6/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
NAME THROWER, WILLIAM L
STREET ADDRESS 1930 N.W. 119TH ST. #722
CITY-ST-ZIP MIAMI FL

1.1 TITLE D Change Addition
1.2 NAME ANTHONY, JACQUELYN
1.3 STREET ADDRESS 3010 N.W. 211 Street
1.4 CITY-ST-ZIP Miami, Fl. 33056

TITLE T DELETE
NAME STOKES, MAUREEN
STREET ADDRESS 21121 N.E. 2ND AVE.
CITY-ST-ZIP MIAMI FL

2.1 TITLE T Change Addition
2.2 NAME CAMPBELL, MAUREEN
2.3 STREET ADDRESS 21151 N.E. 2nd Avenue
2.4 CITY-ST-ZIP Miami, Fl. 33179

TITLE D DELETE
NAME MOSS JR, LEDLY O
STREET ADDRESS 20177 N.W. 35TH AVE.
CITY-ST-ZIP MIAMI FL

3.1 TITLE D Change Addition
3.2 NAME DWYER, CEDRIC
3.3 STREET ADDRESS 273 N.E. 163rd Street
3.4 CITY-ST-ZIP North Miami Beach, Fl. 33162

TITLE S DELETE
NAME MATTHEWS, HAZEL
STREET ADDRESS 420 NW 91ST TERR.
CITY-ST-ZIP EL PRITAL FL 33150

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Horace D. Ward

3/6/97 305-652-6797

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone # 0032364

CR2E037 (9/96)