## 2002 UNIFORM BUSINESS REPORT (UBR) FILED Apr 22, 2002 8:00 am Secretary of State **DOCUMENT # 707653** 1. Entity Name ST ANDREW'S EPISCOPAL CHURCH, INC. 04-22-2002 90181 004 \*\*\*\*61.25 Principal Place of Business Mailing Address 14260 OLD CUTLER ROAD 14260 OLD CUTLER ROAD MIAMI FL 33158 MIAMI FL 33158 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 23-7273769 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) GAEBE, JOHN 2950 S.W. 27TH AVENUE SUITE 100 **MIAMI FL 33133** City Zip Code 8. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Addition ☐ Change HAMLIN, RICHARD L NAME NAME 9453 S.W. 185 ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33176 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition GAEBE, JOHN NAME NAME STREET ADDRESS 5870 S.W. 96 STREET STREET ADDRESS CITY-ST-ZIP MIAMI FL 33156 CITY-ST-7IP TITI F Delete TITLE -□.Change. XXAddition John H. Edwards CARR, WILLIAM H NAME NAME 11724 SW 119 Ter STREET ADDRESS 9730 SW 140 STREET STREET ADDRESS Miami FL 33186 CITY-ST-ZIP MIAMI FL 33176 CITY-ST-ZIP TITLE ☐ Delete TITLE 本本 Change ☐ Addition **BROWNING, ELLEN** Browning, Ellen 8440 SW 162 Ter NAME NAME 5345 S.W. 99 TERRACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL 33156 CITY-ST-ZIP Miami FL 33157 TITLE Delete TITLE ☐ Change X-X Addition PINDER, RONALD NAME NAME Derek E. Lyth STREET ADDRESS 7851 SW 170 STREET STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33157** CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-7IP

NAME

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

LLEWELYN, MARICELA

9268 SW 146 PLACE

MIAMI FL 33186

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR