2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 07, 2005 8:00 am
Secretary of State
04-07-2005 90029 046 ****61.25

DOCUMENT # 707653

1. Entity Name

ST ANDREW'S EPISCOPAL CHURCH, INC.

50034555

Principal Place of Business	Mailing Address
14260 OLD CUTLER ROAD MIAMI FL 33158	14260 OLD CUTLER ROAD MIAMI FL 33158

1st MOORE CR2E037 (10/04)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 23-7273769 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GAEBE, JOHN 2950 S.W. 27TH AVENUE SUITE 100 MIAMI FL 33133	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25
Due By May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HAMLIN, RICHARD L 9453 S.W. 185 ST. MIAMI FL 33176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GAEBE, JOHN 5870 S.W. 96 STREET MIAMI FL 33156	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MINTON, FRANK A 7865 SW 87 CT MIAMI FL 33157	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Hemingway, William 7950 SW 165 ST Miami FL 33157 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BROWNING, ELLEN 8440 SW 162 TER MIAMI FL 33157	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Lee, Kathleen 15755 SW 102 PL Miami FL 33157 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DONOGHUE, MAUREEN 16745 SW 87 CT MIAMI FL 33157	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Heyliger-Browne, Cyd 1561 LUGO AVE Miami FL 33156 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SWINK, BRADFORD 13980 SW 158 TERRACE MIAMI FL 33157	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Munson, Wayne 15050 SW 152 TER Miami FL 33157 ☐ 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.

SIGNATURE: Rev. Richard L. Hamlin 4/1/05 305-238-2161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #