

FILE NOW: FILING FEE IS \$61.25

FILED

**Feb 24 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 710328 (6)
1. Corporation Name
ST. MARY'S EPISCOPAL CHURCH, INC.

Principal Place of Business 1010 24TH AVE W PALMETTO FL 34221	Mailing Address 1010 24TH AVE W PALMETTO FL 34221
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3. Date Incorporated or Qualified
01/28/1966

4. FEI Number 59-1430406	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

KIBBEN, KIRBY
4705 7TH STREET CT E
ELLENTON FL 34222

10. Name and Address of New Registered Agent

81 Name Briggs, Thelma
82 Street Address (P.O. Box Number is Not Acceptable) 2801 - 14th St. W.
83
84 City Palmetto
85 State FL
86 Zip Code 34221

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 *Thelma Briggs* **Thelma Briggs, Senior Warden** DATE **Feb 18, 1998**

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	<input checked="" type="checkbox"/> DELETE KIBBEN, KIRBY 4705 7TH ST. CT E ELLENTON FL	1.1 TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1.2 NAME Bullock, Chester 1.3 STREET ADDRESS 3914 - 57th Dr. E. 1.4 CITY - ST - ZIP Bradenton, FL 34203
TITLE D	<input type="checkbox"/> DELETE PACE, JACK 105 JACARANDA WAY PARRISH FL	2.1 TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2.2 NAME Hoffman, Lee Ann 2.3 STREET ADDRESS 708 - 13th Ave. Dr. Cir. W. 2.4 CITY - ST - ZIP Palmetto, FL 34221
TITLE D	<input checked="" type="checkbox"/> DELETE RENNEY, BILL 2901 95TH AVE E PARRISH FL	3.1 TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3.2 NAME Martin, K.V. 3.3 STREET ADDRESS 9915 Hatteras Lane 3.4 CITY - ST - ZIP Parrish, FL 34219
TITLE D	<input type="checkbox"/> DELETE SADOWSKI, MARK 7116 91ST ST E PALMETTO FL	4.1 TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4.2 NAME Molteni, Jack 4.3 STREET ADDRESS 9834 Sucia Circle 4.4 CITY - ST - ZIP Parrish, FL 34219
TITLE D	<input checked="" type="checkbox"/> DELETE LANGLEY, GAIL 2203 6TH STREET WEST PALMETTO FL	5.1 TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5.2 NAME Smelser, Margaret 5.3 STREET ADDRESS 486 Marlin Lane 5.4 CITY - ST - ZIP Ellenton, FL 34222
TITLE D	<input type="checkbox"/> DELETE ECKERT, PATTI 904 24TH AVE W PALMETTO FL	6.1 TITLE D <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME Eckert, Patti 6.3 STREET ADDRESS 904 24th Ave W 6.4 CITY - ST - ZIP Palmetto, FL 34221

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14. 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 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: *Lawrence E. Bustle, Jr.* **Lawrence E. Bustle, JR., Treasurer** DATE **2/12/98** PHONE **941-729-5461**

CP2E037 (10/97)