


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90150 036 ****61.25

DOCUMENT # 710328

1. Entity 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

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

04152008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-1430406 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

DUNKELBERGER, DOUGLAS
4506PINFISH LANE
PALMETTO, FL 34221

7. Name and Address of New Registered Agent

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 Douglas Dunkelberger (NOTE: Registered Agent signature required when reinstating) DATE 04/16/2008

Filing Fee is \$61.25 Due by May 1, 2008

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

TITLE	T	<input type="checkbox"/> Delete
NAME	WRIGHT, JAMES R	
STREET ADDRESS	2321 15TH STREET WEST	
CITY-ST-ZIP	PALMETTO, FL 34221	
TITLE	D	<input type="checkbox"/> Delete
NAME	BORROWMAN, SANDY	
STREET ADDRESS	203 29TH STREET W	
CITY-ST-ZIP	BRADENTON, FL 34205	
TITLE	D	<input type="checkbox"/> Delete
NAME	CUMMING, JOHN W	
STREET ADDRESS	608 61ST STREET EAST	
CITY-ST-ZIP	PALMETTO, FL 34221	
TITLE	D	<input type="checkbox"/> Delete
NAME	BUSTLE, EDITH	
STREET ADDRESS	2205 5TH STREET WEST	
CITY-ST-ZIP	PALMETTO, FL 34221	
TITLE	S	<input type="checkbox"/> Delete
NAME	SAYRE, DORINDA	
STREET ADDRESS	4361 POMPANO LN	
CITY-ST-ZIP	PALMETTO, FL 34221	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FRIEDRICKS, MICHELE	
STREET ADDRESS	5005 13TH STREET WEST	
CITY-ST-ZIP	PALMETTO, FL 34221	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gagne, Roland	
STREET ADDRESS	7415 Morningside Dr. S.	
CITY-ST-ZIP	Ellenton, FL 34222	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MacDonald, Geraldine	
STREET ADDRESS	3610 Adelia Dr.	
CITY-ST-ZIP	Parrish, FL 34219	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Pierson, Eilene	
STREET ADDRESS	2320 Terra Ceia Blvd. #207	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Tankersley, Michele	
STREET ADDRESS	1514 4th Street, West	
CITY-ST-ZIP	Palmetto, FL	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Tankersley, Michele	
STREET ADDRESS	1514 4th Street, West	
CITY-ST-ZIP	Palmetto, FL 34221	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: James R. Wright *James R. Wright, Jr.* DATE 04/16/2008 DAYTIME PHONE # 941 722-5292