FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 15 PM 3:23

DOCUMENT # 710640 (4)

1. Corporation Name

EPISCOPAL CHILDREN'S SERVICES, INC.

Principal Place of Business	Mailing Address
134 E CHURCH ST P.O. BOX 40605 new address JACKSONVILLE FL 32203 on no. 2	134 E CHURCH ST P.O. BOX 40605 JACKSONVILLE FL 32203

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/31/1966
3a. Date of Last Report: 04/28/1994
4. FEI Number: 59-1146765 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 4070 Boulevard Center Dr.	26 same as in no. 2
Suite, Apt. #, etc. 22 Suite 200	Suite, Apt. #, etc. 27
City & State 23 Jacksonville, Florida	City & State 28
Zip 24 32207 Country 25 Duval	Zip 29 Country 30

9. Name and Address of Current Registered Agent

WILKINSON SUSAN
134 E CHURCH ST
JACKSONVILLE FL 32203

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

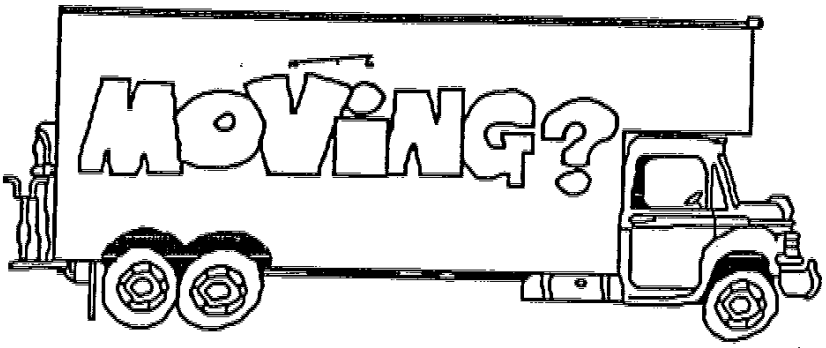
SIGNATURE: SUSAN WILKINSON - EXECUTIVE DIRECTOR 2/08/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CD	same	1.1 TITLE	1st VD	☒ Change ☐ Addition
NAME	JECKO STEPHEN		1.2 NAME	Brodt, Ann	
STREET ADDRESS	325 MARKET STREET		1.3 STREET ADDRESS	12928 Deep Lagoon Place	
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP	Jacksonville, FL 32246	
TITLE	ED	same	2.1 TITLE	2nd VD	☒ Change ☐ Addition
NAME	WILKINSON, SUSAN		2.2 NAME	Owens, Otis	
STREET ADDRESS	1001 NEPTUNE LANE		2.3 STREET ADDRESS	Founder's Hall/2086 - UNF	
CITY-ST-ZIP	NEPTUNE BEACH FL		2.4 CITY-ST-ZIP	4567 St John's Bluff, Jax, FL 32216	
TITLE	PD	changed	3.1 TITLE	PD	☒ Change ☐ Addition
NAME	ROSS, BILL		3.2 NAME	Boone, Barbara	
STREET ADDRESS	8162 PINELAKE ROAD		3.3 STREET ADDRESS	520 1st Street	
CITY-ST-ZIP	JACKSONVILLE FL 32256		3.4 CITY-ST-ZIP	Neptune Beach, FL 32266	
TITLE	VD	changed	4.1 TITLE	S	☒ Change ☐ Addition
NAME	MILLER, FRED		4.2 NAME	Flowers, Mike	
STREET ADDRESS	4610 APACHE AVENUE		4.3 STREET ADDRESS	535 N. Washington Street	
CITY-ST-ZIP	JACKSONVILLE FL 32210		4.4 CITY-ST-ZIP	Jacksonville, FL 32202	
TITLE	TD	changed	5.1 TITLE	T	☒ Change ☐ Addition
NAME	BRODT, ANNE		5.2 NAME	Borders, Edwin	
STREET ADDRESS	12928 DEEP LAGOON PLACE		5.3 STREET ADDRESS	1816 Pelican Court	
CITY-ST-ZIP	JACKSONVILLE FL 32216		5.4 CITY-ST-ZIP	Neptune Beach, FL 32266	
TITLE	S	changed	6.1 TITLE		☐ Change ☐ Addition
NAME	BRODT, ANNE		6.2 NAME		
STREET ADDRESS	12928 DEEP LAGOON PLACE		6.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL 32216		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: SUSAN WILKINSON - EXECUTIVE DIRECTOR 2/08/95 (904)390-4640
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0021044



EPISCOPAL CHILDREN'S SERVICES, INC.

(formerly Episcopal Child Care and Development Centers, Inc.)

HAS MOVED TO A NEW LOCATION EFFECTIVE JULY 14, 1994.

THE NEW ADDRESS IS:

4070 BOULEVARD CENTER DRIVE
Suite 200
JACKSONVILLE, FL 32207

Phone: 390-4640

Fax: 390-4651