# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**
**Apr 30, 2004 8:00 am**
**Secretary of State**
04-30-2004 90272 038 ****61.25

DOCUMENT # 710640

1. Entity Name

EPISCOPAL CHILDREN'S SERVICES, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 100 BELL TEL WAY<br>SUITE 100<br>JACKSONVILLE FL 32216<br>US | 100 BELL TEL WAY<br>SUITE 100<br>JACKSONVILLE FL 32216<br>US |

MOORE CR2E037 (11/03)

| 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 59-1146765 ☐ Applied For ☐ Not Applicable

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

**6. Name and Address of Current Registered Agent**

SMITH HULSEY & BUSEY
225 WATER STREET
SUITE 1800
JACKSONVILLE FL 32202

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

**FILE NOW: FEE IS $61.25**
**Due By May 1, 2004**

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 | CD<br>JECKO STEPHEN<br>325 MARKET STREET<br>JACKSONVILLE FL 32202 | ☒ Delete | D<br>Wiles, Susan<br>1100 Sawgrass Village Drive #201E<br>Ponte Vedra Beach FL 32082 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>BUSEY, STEPHEN D<br>225 WATER STREET<br>JACKSONVILLE FL 32202 | ☒ Delete | T/D<br>Mullinix, Ted<br>111 Riverside Ave<br>Jacksonville FL 32205 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>DAVIS, NAT<br>1416 JEFFERSON STREET<br>JACKSONVILLE FL 32209 | ☐ Delete | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>GIONOULIS, DEBOERAH<br>PO BOX 5270<br>JACKSONVILLE FL 32207 | ☐ Delete | C/D<br>Gionoulis, Deborah<br>PO Box 5270<br>Jacksonville FL 32207 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>HERBERT, ADAM<br>12000 ALUMNI WAY<br>JACKSONVILLE FL 32224 | ☒ Delete | S/D<br>Martin, Christopher Rev.<br>400 St. Johns Ave<br>Green Cove Springs FL 32043 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>HOFFMAN, JEFF<br>112 WEST ADAMS STREET<br>JACKSONVILLE FL 32202 | ☒ Delete | D<br>Fannin, Mel<br>625-D Ponte Vedra Blvd<br>Ponte Vedra Beach FL 32082 | ☐ 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:** Connie S. Stephel, C.E.O. 4/28/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

attachment
9407613

**Attachment to Document #710640**
**Additions to Block 11**

D
Drayton-Harris, Pauline
330 E. Bay Street, RM 356
Jacksonville, FL 32202

D
Gupton, Frances
138 Coastal Oak Circle
Ponte Vedra, FL 32082

D
Howard, Rt. Rev. John
325 Market Street
Jacksonville, FL 32207

D
Pappas, Lynn
200 W. Forsyth St.
Jacksonville, FL 32202

CEO
Stophel, Connie
100 Bell Tel Way, Suite 100
Jacksonville, FL 32216