2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2004 8:00 am
Secretary of State
04-07-2004 90006 019 ****61.25

J44U43b82

DOCUMENT # 713025

1. Entity Name
ALL SOULS' EPISCOPAL CHURCH FOUNDATION, INC.

Principal Place of Business	Mailing Address
4025 PINE TREE DR MIAMI BEACH, FL 33140 US	4025 PINE TREE DR MIAMI BEACH, FL 33140 US

01122004 Chg-NP CR2E037 (10/03)

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 23-7062126 ☐ 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
CULLEN, DONNA 9133 COLLINS AVE, APT 1-B SURFSIDE, FL 33154 – 3118	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

Filing 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	D BOGGESS, JAMES 9944 COLLINS AVE 3 BEL HARBOR, FL 331541811	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Bonnie Dosik Jimenez 1825 Daytonia Rd. Miami Beach, FL 33141-1736	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Richard Mahfood 291 Bal Bay Dr #210 Bal Harbour, FL 33154-1358	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ALLISON, WILLIAM L 13255 SW 16TH CT., APT. 210 PEMBROKE PINES, FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Stephen Harriman 4201 Royal Palm Miami Beach, FL 33140	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MORRISON, HANK 93 PALM AVE. MIAMI BEACH, FL 33139-5137	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	as Senior Warden Mary Harriman 4201 Royal Palm Miami Beach, FL 33140	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: Donna D Cullen 3-28-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #