## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: Marisela Fernandez

SIGNATURE AND TYPED OR PRINTED NAME OF

## **Secretary of State DOCUMENT #714982** 03-14-2007 90022 050 \*\*\*\*70.00 SAINT CHRISTOPHER EPISCOPAL CHURCH, INC. Principal Place of Business Mailing Address 1063 N HAVERHILL RD 40035145 1063 N HAVERHILL RD WEST PALM BEACH, FL 33417 WEST PALM BEACH, FL 33417 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03022007 Chg-NP CR2E037 (12/06) City & State 4. FEI Number 59-1466024 Applied For City & State Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TAYLOR, REV. TERRENCE A. SUTCLIFFE, REV. D. Street Address (P.O. Box Number is Not Acceptable) 1063 N.HAVERHILL RD. WEST PALM BEACH, FL 33417 3526 Whitehall DR.#403 City West Palm Beach 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. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Due by May 1, 2007 Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete TITLE ■ Addition TITLE WHITE MARTIN R NAME NAME 1958 SHERWOOD FOREST BLVD STREET ADDRESS STREET ADDRESS WEST PALM BEACH, FL 33415 CITY-ST-ZIP CITY-ST-ZIP TITLE X Delete TITLE Change Addition EVANS, JOHN NAME NAME CYRIS, ELET 3526 WHITEHALL DR #403 STREET ADDRESS STREET ADDRESS 109 Van Gogh Way, Royal Palm FL 38411 WEST PALM BEACH, FL 33401 CITY-ST-7IP COY-ST-7IP Z Delete ☐ Change TITLE TITLE BROOKS, FLOYD NAME IDALIA, ADAMS 5475 CLUB CIRCLE STREET ADDRESS 4579 VANGOR AVE #18 STREET ADDRESS WEST PALM BEACH, FL 33415 CITY-ST-ZIP WEST PALM BEACH, FL 33417 CITY-ST-ZIP X Delete Change Addition TITLE TITLE CLELAND, CHAUNCEY NAME MALKE FRANKLIN, HERMIONE STREET ADDRESS 960 WOODLAND AVE. STREET ADDRESS 206 PB Plantation Blvd WEST PALM BEACH, FL 33415 CITY-ST-ZIP CITY-ST-ZIP Royal Palm Beach, FL TITLE TITLE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS 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 emptwered.

FILED

Mar 14, 2007 8:00 am

561-683-8167

Davime Phone #