

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720172

FILED  
Feb 16, 2010  
Secretary of State

**Entity Name:** ST. SIMON'S EPISCOPAL CHURCH, INC.

**Current Principal Place of Business:**

10950 S.W. 34TH ST.  
MIAMI, FL 331653542

**New Principal Place of Business:**

**Current Mailing Address:**

10950 S.W. 34TH ST.  
MIAMI, FL 331653542

**New Mailing Address:**

**FEI Number:** 59-0992601

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SANDOVAL, MD, CARLOS J REV.  
1000 NW NORTH RIVER DRIVE  
MIAMI, FL 33136 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SANDOVAL, CARLOS REV.  
Address: 1000 NW NORTH RIVER DRIVE  
City-St-Zip: MIAMI, FL 33136

Title: VD  
Name: MATTHEW, HOELSCHER  
Address: 3620 SW 106TH AVENUE  
City-St-Zip: MIAMI, FL 33165

Title: SW  
Name: AGUERO, ROBERTO  
Address: 4100 SW 82 CT  
City-St-Zip: MIAMI, FL 33155

Title: VD  
Name: RIVERO, JORGE  
Address: 8473 SW 58TH STREET  
City-St-Zip: MIAMI, FL 33143

Title: VD  
Name: CONNIE, BORONAT  
Address: 5800 SW 112TH AVENUE  
City-St-Zip: MIAMI, FL 33173

Title: VD  
Name: LYON, CHARLES  
Address: 917 NW123 AV.  
City-St-Zip: MIAMI, FL 33182

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CAROLINA V. MENDOZA

CS

02/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date