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Mar 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 720203 (9)
 1. Corporation Name
TRINITY EPISCOPAL CATHEDRAL, INC.



Principal Place of Business 464 N E 16TH ST MIAMI FL 33132-1222	Mailing Address 464 N E 16TH ST MIAMI FL 33132-1222
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3. Date Incorporated or Qualified 02/04/1971	
4. FEI Number 59-0838103	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

21. Principal Place of Business Suite, Apt #, etc.	22. City & State	23. Zip	24. Country	25. Country	26. Mailing Address Suite, Apt #, etc.	27. City & State	28. Zip	29. Country	30. Country
		33132-1220					33132-1220		

9. Name and Address of Current Registered Agent
**KRICKBAUM, DONALD W.
 464 N.E. 16TH STREET
 MIAMI FL 33132**

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRICKBAUM, DONALD W.	1.2 NAME	
STREET ADDRESS	464 N.E. 16TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	Vice President <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STEUERNAGEL, CLIFFORD	2.2 NAME	Phillip Consolo
STREET ADDRESS	640 NE 69 STREET	2.3 STREET ADDRESS	15310 Dunbarton Place
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Miami Lakes FL 33016 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	TD <input type="checkbox"/> DELETE	3.1 TITLE	
NAME	LEE, ANNE S	3.2 NAME	
STREET ADDRESS	519 LORETTO AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	3.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NORMAN, HARRIET W	4.2 NAME	Patrick Parham
STREET ADDRESS	8200 SW 98 STREET	4.3 STREET ADDRESS	21085 NE 34 Avenue #102
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	Aventura FL 33180
TITLE	SD <input checked="" type="checkbox"/> DELETE	5.1 TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	COLON, CHRISTOPHER	5.2 NAME	Anne Scupholme
STREET ADDRESS	3741 DAFFODIL LANE	5.3 STREET ADDRESS	9311 SW 4th Street
CITY-ST-ZIP	MIRAMAR FL	5.4 CITY-ST-ZIP	Miami FL 33174
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: *Donald W. Krickbaum* Donald W. Krickbaum 2/20/98 305 374 3372

CP2E037 (10/97)