

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 06, 2003 8:00 am
Secretary of State

01-06-2003 90029 017 ****61.25

DOCUMENT # 722055



1. Entity Name
SAINT ANDREW'S EPISCOPAL CHURCH OF SPRING HILL, INC.

Principal Place of Business
**2301 DELTONA BLVD.
SPRING HILL FL 34606**

Mailing Address
**P.O. BOX 5026
SPRING HILL FL 32611**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **23-7185136**

Applied For
Not Applicable

Zip Country

Zip Country

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

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, JONATHAN D
4542 COMMERCIAL WAY
SPRING HILL FL 34606**

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

FILE NOW: FEE IS \$61.25

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	S	<input type="checkbox"/> Delete
NAME	HARRIS, MARY ANNE	
STREET ADDRESS	7239 HOLIDAY DRIVE	
CITY-ST-ZIP	SPRING HILL FL 34606-5032	
TITLE	P	<input type="checkbox"/> Delete
NAME	MURRAY, ROBIN G	
STREET ADDRESS	7489 OAK TREE LANE	
CITY-ST-ZIP	SPRING HILL FL 34607-2324	
TITLE	DV	<input type="checkbox"/> Delete
NAME	STAFSETH, DAVID	
STREET ADDRESS	4284 RACHEL BLVD.	
CITY-ST-ZIP	SPRING HILL FL 34607	
TITLE	T	<input type="checkbox"/> Delete
NAME	PROSSER, WILLIAM B JR	
STREET ADDRESS	5025 HARBINGER ROAD	
CITY-ST-ZIP	SPRING HILL FL 34608	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	UNDERWOOD, RUTH	
STREET ADDRESS	6115 OBERLIN ST	
CITY-ST-ZIP	SPRING HILL FL 34606	
TITLE	D	<input type="checkbox"/> Delete
NAME	CLIFTON, LUTHER	
STREET ADDRESS	11125 BELLTOWER STREET	
CITY-ST-ZIP	SPRING HILL FL 34608	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KAREN AMMEN	
STREET ADDRESS	5023 GOLF CLUB LANE	
CITY-ST-ZIP	BROOKSVILLE FL 34609	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAUL WILKS	
STREET ADDRESS	4185 GLADE ROAD	
CITY-ST-ZIP	SPRING HILL FL 34606	

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: Mary Anne Harris **Mary Anne Harris** 1/3/2003 352/683-2010

CR2E037 (10/02)