

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

**DOCUMENT # 722513 (9)**

1995 MAY -1 PM 2:54

1. Corporation Name

**THE EPISCOPAL CHURCH OF ST. MARK THE EVANGELIST,  
INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1750 E. OAKLAND PARK BLVD.  
FT. LAUDERDALE FL 33334

1750 E. OAKLAND PARK BLVD.  
FT. LAUDERDALE FL 33334

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1972

3a. Date of Last Report

08/08/1994

4. FEI Number

59-6031689

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suits, Apt. #, etc.

26 Suits, Apt. #, etc.

5. Certificate of Status Desired

\$0.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

23 City & State

28 City & State

7. Nonprofit with IRS 501(c)(3)  
Tax Exempt Status

\$68.75 Supplemental  
Fee Not Required

24 Zip

25 Country

29 Zip

30 Country

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SINK, GERRI  
1750 E. OAKLAND PARK BLVD.  
FT. LAUDERDALE FL 33334

81 Name

Krblich, Jane

82 Street Address (P.O. Box Number is Not Acceptable)

1750 E. Oakland Park Blvd

83

84 City

Ft. Lauderdale

FL

85 Zip Code

33334

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Jane S. Krblich JANE S. KRBlich Interim Business Officer 5/5/95

(Signature) (Typed name of registered agent and fee if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME YOUNG, JAMES  
STREET ADDRESS 1256 SEMINOLE DR  
CITY-ST-ZIP FT LAUDERDALE FL 33304

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS 400001492134  
1.4 CITY-ST-ZIP -05/17/95--01153--013  
\*\*\*\*\*\$1.25 \*\*\*\*\*\$1.25

TITLE CS  
NAME HOLMS, JOYCE  
STREET ADDRESS 3500 NW 7 CT.  
CITY-ST-ZIP FT. LAUDERDALE FL

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE VD  
NAME DAVIS, GRAY  
STREET ADDRESS 6497 LA ROSA COURT  
CITY-ST-ZIP BOCA RATON FL 33433

3.1 TITLE Junior Warden  Change  Addition  
3.2 NAME Van Houdt, Robert  
3.3 STREET ADDRESS 4141 NW 26 Street #216  
3.4 CITY-ST-ZIP LAuderhill, FL 33313

TITLE TD  
NAME KRBlich, CHARLES  
STREET ADDRESS 4240 NE 19TH AVE.  
CITY-ST-ZIP FT LAUDERDALE FL

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE P  
NAME EVANS, RALPH  
STREET ADDRESS 2804 CORAL SHORES DR  
CITY-ST-ZIP FT. LAUDERDALE FL

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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:

Ralph E Evans, Jr Ralph E Evans, Jr 4/20/95 (305) 563-5155

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

(DATE)

(Typeing Here)