1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 722513**

1. Corporation Name

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

Principal Place of Business

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

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

2. Principal Place of Business

Suite, Apt. #, etc.

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

## FILED May 24, 1999 8:00 am Secretary of State

05-24-1999 90004 008 \*\*\*\*61.25



3. Date incorporated or Qualifed

01/24/1972

4. FEI Number

22		27				i	59-6031689		Not	Applicable
City & State	е	28	City & State			Ì	5. Certifcate of Status Desired		\$8.75 A Fee Re	
23	Country	281	Zip Country				6 Flories Compaign Financing		\$5.00	Man Da
Zip	,	-	30				<ol><li>Election Campaign Financing Trust Fund Contribution</li></ol>		Added to	•
24					10. Name and Address of New Registered Agent					
9. Name and Address of Current Registered Agent					Name		Tighing and Madicas of Mari		9	
					Shareef, Dilawar					
Daugherty, Robert					82 Street Address (P.O. Box Number is Not Acceptable) 1750 E. Oakland Park Blvd.					
1750 E. OAKLAND PARK BLVD.										
FT. LAUDERDALE FL 33334						Fort	: Lauderdale, F1 3	3334		
				84	City	_			85 Zip C	ode
ı								<u>FL</u>	<del></del>	
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 the fire 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 except the obligations of, Section 617.0503, Florida Statutes.										
agent. I a	m familiar with, and accept the obligation	ons of,	Section 617.0503, Florida	Statutes	•		•	1/20	199	
SIGNATURE Signature, typed or printed name of registered agent and title if a poliphole. (NOTE: Registered Agent signature required when reinstating)  DATE										
12.	OFFICERS AND		<i>Z</i> /	13.	a.g.rective re		ADDITIONS/CHANGES TO O		DIRECTO	RS IN 12
TITLE	S	<i>-</i>	X DELETE	1.1 TITLE		S			Change	Addition
NAME	METZ, JANET		1.2 NAME Ar		And	lerson, Pamela				
STREET ADDRESS	A CONTRACTOR ATTORNEY			13 STREET	ADDRESS	260	)9 N E 22nd Street			
CITY-ST-ZIP	WILTON MANORS FL 33334			1.4 CITY-S		ı	t Lauderdale Fl 3			
TITLE	D	₩ DELETE				D			☐ Change	Addition
NAME	HOLMES, JOYCE		<b></b>	2.2 NAME		Bra	ynon, Ronald			
STREET ADDRESS	****			2.3 STREET	ADDRESS		08 NW 67th Avenue			
CITY-ST-ZIP	FT. LAUDERDALE FL			2. 4 CITY-5	T-ZIP		derhill, Fl 33319	)		
TITLE	TD		☐ DELETE	3.1 TITLE					Change	Addition
NAME	ROTH, VERRA A			3.2 NAME	ļ					
STREET ADDRESS	6731 N.W. 28 AVE.			3.3 STREE	ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL			3.4. CITY-S	T-ZIP			····		
TITLE	PD		☐ DELETE	4.1 TITLE					☐ Change	☐ Addition
NAME	EVANS, JR. R E.			4. 2 NAME						
STREET ADDRESS	2804 CORAL SHORES DR.			4.3 STREE	ADDRESS					
CITY-ST-ZIP	FT.LAUDERDALE FL			4.4 CITY-S	T-ZIP					
TITLE			☐ DELETE	5.1 TITLE	Ì				Change	Addition
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREE	TADDRESS					
CITY-ST-ZIP				5.4 CITY-S	T-ZIP	<u> </u>				
TITLE			C DELETE	6.1 TITLE	-	<b> </b>			Change	Addition
NAME				6.2 NAME						j.
STREET ADDRESS	•			6.3 STREE	T ADDRESS	1				
OTTO CT. TIP				6.4 CITY-S	T-ZiP	1				

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, with all other like empowered.

SIGNATURE:

Applied For