


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 20, 2007 8:00 am
Secretary of State

08-20-2007 90055 018 ****70.00

DOCUMENT # 722513

1. Entity Name
 THE EPISCOPAL CHURCH OF ST. MARK THE EVANGELIST, INC.



Principal Place of Business
 1750 E. OAKLAND PARK BLVD.
 FT. LAUDERDALE, FL 33334

Mailing Address
 1750 E. OAKLAND PARK BLVD.
 FT. LAUDERDALE, FL 33334

DO NOT WRITE IN THIS SPACE

40120000



07202007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-6031689	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHAREEF, DILAWAR
 1750 E OAKLAND PARK BLVD
 FORT LAUDERDALE, FL 33334

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

Filing Fee is \$61.25
Due by September 14, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROTH, VERRA A 6731 N.W. 28 AVE. FT LAUDERDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RICHARDSON, HARRY 3160 NW 69 STREET FORT LAUDERDALE, FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAMP, GARY D FR. 1750 E. OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33334
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELVILLE, LEIGHTON SR WDN 1566 BANYON WAY WESTON, FL 33327
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Gary D. Hamp 8/1/07 954 563-5155
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #