FILED

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

Feb 27, 2003 8:00 am Secretary of State DOCUMENT # 723425 1. Entity Name 02-27-2003 90182 009 ****61.25 CHRIST EPISCOPAL CHURCH, INC. Principal Place of Business Mailing Address 3481 HIBISCUS ST. POP BOX 330006 The Partie of the State of the MIAMI FL 33133-5717 MIAMI FL 33133 2. Principal Place of Business 3. Mailing Address CHECK HERE IF MAKING CHANGES Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number 59-2352066 Applied For Not Applicable Zip Country ---Country \$8.75 Additional 5.- Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GRIFFITH, BERNARD M Street Address (P.O. Box Number is Not Acceptable) 3481 HIBISCUS ST. MIAMI FL 33133-5717 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Q, 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE **⊠** Delete TITLE **★** Change ☐ Addition DANIELS, WILLIE C NAME NAME Wilder, Robert 14820 HARRISON ST STREET ADDRESS STREET ADDRESS 10855 S. W. 142nd Lane Miami, FL 33176 CITY-ST-ZIP **MIAMI FL 33176** CITY-ST-ZIP TITLE **⊠** Delete TITLE Change ☐ Addition MCCOY, CECIL NAME Saunders, Thaddeus 5840 SW 62ND TERR STREET ADDRESS STREET ADDRESS 3751 Oak Avenue CITY-ST-ZIP **MIAMI FL 33143** CITY-ST-ZIP Miami, FL 33133 DS TITLE ☐ Delete TITLE ☐ Change Addition CARTER-WRIGHT, MARCIA NAME NAME 14680 HARRISON STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33176 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition FIFE, CATHY T NAME NAME STREET ADDRESS 14960 BUCHANAN STREET STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33176** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 peport is true and accurate and nat 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 of trustee employment to execute this peport as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

changed, or on an attachment y

305) 442-8542

(305) 442-8542

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

SIGNATURE:

U	NIFORM/BUSIN	ESS/REPOR?	r (UE	SR)	11/1/1	Church	, —	
1. Entity Na	MENT # 723425 EPISCOPAL CHURCH, INC.		- AREAT S		J y or	10028	1542	
Principal Pla 3481 HIBISCL MIAMI FL 331		Mailing Address POP BOX 330006 MIAMI FL 33133						
2. Principal	Place of Business	3. Mailing Address					<u> </u>	
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number	59-2352066	 	polied For
Zip Country		Zip	Country		5. Certificate of		\$8.75 Ad Fee Requir	iditional
	6. Name and Address of Curren	t Registered Agent			7. Name and A	dress of New Registe	red Agent	
COIFEITI	U PERMADO 14			lame			•	
3481 HI	H, BERNARD.M @B BISCUS ST. L 33133-5717	er e	·······································	Street Address (P.O. Box Number is Not Acceptable)				
			C	City			FL Zip Ccc	je
signature	e named entity submits this statement fations of registered agent. Flex: Barbary Signature, typed or printed name of registered agent. FILE NOW: FEE IS \$61,25	nt and title if applicable. (NOTE: 9. Election Cam Trust Fund Co	: Registered Age	ent signature required	\$5.00 May Be Added to Fees	O2 /2 Make Ch	neck Payable	to State
TITLE	OFFICERS AND D		11.		ADDITIONS/CHAN	GES TO OFFICERS AND		
NAME STREET ADDRESS CITY-ST-ZIP	DANIELS, WILLIE C 14820 HARRISON ST MIAMI FL 33176	∑ Delete	TITLE NAME STREET AD CITY-ST-Z	DRESS 108	der, Rober 55 S. W. 1 mi, FL 33	42nd Lane	₹ Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI		V (.		☐ Change	☐ Addition
 I hereby of indicated of the corp changed, 	pertify that the information supplied with on this report or supplemental Jeport is poration or the receiver or trustee emplo or on an attachment with an address	n this filing does not qualify for the strue and accurate and the major wered to execute this eport as with all other life empowered.	he exemption signature signature be	on stated in Sec shall have the s y Chapter 617,	ction 119.07(3)(i), F ame legal effect as Florida Statutes; ar	orida Statutes. I further if made under cath; tha nd that my name appea	certify that the in at I am an officer ars in Block 10 or	formation or director Blook 11 if