FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

THE EPISCOPAL FOUNDATION OF TALLAHASSEE, INC.

FILED Mar 19 1998 8:00am Secretary of State

ate Incorporated or Qualified 06/04/1973	

Principal Place of Business Mailing Address					— I 188111 ISBNO 11646 ANNE ANNO ANNO BURO BURO BURO BIBNI BUBNI BUBNI BURON DIÇTRI 1881		
211 N. MONRO TALLAHASSEE		211 N. MONROE STREET TALLAHASSEE FL 32301			3. Date Incorporated or Qualified 06/04/1973		
					4. FEI Number 59-2917710	Applied For Not Applicable	
2. Principal P	lace of Business	2a. Mailing Address			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State	9	City & State	······		7. Is this nonprofit corporation a homeowners a	ssociation?	
Zip	Country	Zip	Country		8. This corporation owes or has paid the curren	t year intangible	
24	9. Name and Address of Current	29 34	<u> </u>		Personal Property Tax due June 30. 10. Name and Address of New Registered Age		
	p. Marie and Address of Current	Hohistoren Marit	81	Name	10. Hallio and Address of Note Hogeleton Ag		
VARN.W	ILFRED C.		82	Chant	Address (C.O. Boy Number to Not Acceptable)		
	JTH GADSDEN STREET			Street	Address (P.O. Box Number is Not Acceptable)		
TALLAH	ASSEE FL 32301		83			•	
			84	City	FL !	Zip Code	
office of r agent, I a SIGNATURE	egistered agent, or both, in the State or tamiliar with, and accept the obligation of the state				corporation submits this statement for the purpose of chooration's board of directors. I hereby accept the appoin	tment as registered	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND D	RECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE	•		Change Addition	
NAME	DUDLEY, ERIC D.		1.2 NAME				
STREET ADDRESS	211 NORTH MONROE STREET TALLAHASSSEE FL		1.3 STREET				
CITY-ST-ZIP TITLE	VD	DELETE	1.4 CITY - S 2.1 TITLE	I-ZIP	K	Change	
NAME	SCHWARTS, GEOFFREY B.		2.2 NAME		SCHWARTZ	,	
STREET ADDRESS	2253 ARMSTEAD ROAD		2.3 STREET	ADDRESS			
CITY-ST-ZIP	TALLAHASSEE FL		2. 4 CITY-1	ST-ZIP			
TITLE	STD ALAN	DELETE	3.1 TITLE		<u> </u>	Change	
NAME STREET ADORESS	ASKER, ALAN 4715 PINTAIL DRIVE		3.2 NAME 3.3 STREET	ADDDECC			
CITY-ST-ZWP	TALLAHASSEE FL		3.4. CITY-				
TITLE		☐ DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP		DELETE	4.4 CITY - S	T-ZIP		Change	
TITLE NAME			5.1 TITLE 5.2 NAME		_	Township (** This beaution)	
STREET ADDRESS			5.2 NAME 5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S				
TITLE		DELETE	6.1 TITLE			Change	
HAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS		•	
0007 67 700			6 4 NTV . C	T 710			

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.

850) 222 2636