

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2002 8:00 am
Secretary of State

08-01-2002 90168 047 ****70.00

0004007

DOCUMENT # 728761

1. Entity Name

SAINT EDWARDS EPISCOPAL CHURCH

Principal Place of Business

Mailing Address

480 N GRANDVIEW ST
 MT DORA FL 32757
 US

PO BOX 455
 MT DORA FL 32756
 US

971953



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1021915

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional Fee Required.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POTTER, DEL G. A
 308 E FIFTH AVENUE
 MOUNT DORA FL 32757

Name

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

City

FL

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

After September 13, 2002,
 min. will be \$236.25.

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TD Delete
 WILSON, ROBERT
 2105 NORMANDY DRIVE
 MOUNT DORA FL 32757

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

PD Delete
 LASHAR, RUTH
 651 OLD EUSTIS RD
 MOUNT DORA FL 32757

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VD Delete
 WATERHOUSE, RANDY
 3011 WINDHAM DRIVE
 EUSTIS FL 32726

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

VD Change Addition

DIXON, DAVID
 2040 MORNINGSIDE DR.
 MOUNT DORA, FL 32757

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

SD Delete
 STAVEY, VALERIE
 280 W. OAK HILL ROAD
 MOUNT DORA FL 32757

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

SD Change Addition

ANDERMAYER, TOM
 1005 ELYSIUM BLVD.
 MOUNT DORA, FL 32757

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

Change Addition

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 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:

[Signature]

RUTH LASHAR

7/30/02

352-363-2832

CR2E037 (4/02)