

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90034 022 \*\*\*\*70.00

**DOCUMENT # 728761**

1. Entity Name

**SAINT EDWARDS EPISCOPAL CHURCH**



Principal Place of Business

460 N GRANDVIEW ST  
MT DORA FL 32757  
US

Mailing Address

PO BOX 455  
MT DORA FL 32756  
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1021915

Applied For

Not Applicable

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

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
TD  
WILSON, ROBERT  
2105 NORMANDY DRIVE  
MOUNT DORA FL 32757 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
TD  
Emerson, John  
5039 Greenbriar Trail  
Mount Dora FL 32757 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
BURTNETT, PAMELA  
741 E EIGHTH AVE  
MOUNT DORA FL 32757 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
~~Mount Dora FL 32757~~ ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
RACE, ROBERT  
3104 MORNINGSIDE DRIVE  
MOUNT DORA FL 32757 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
SD  
HAUSER, ALISA  
1712 COUNTRY TERRACE LANE  
APOPKA FL 32703 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
SD  
Schwalb, Diane  
6537 Sinisi Drive  
Mount Dora FL 32757 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PD  
VOLLAND, WOODLEIGH REV.  
500 LAKE FOREST CIRCLE  
MOUNT DORA FL 32757 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
DIXON, DAVID  
2040 MORINGSIDE DRIVE  
MOUNT DORA FL 32757 ☒ 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 exemptions contained in Section 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: Rev. Woodleigh H. Volland**

2/21/06 (352)383-2832