


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 24, 2008 8:00 am**  
**Secretary of State**

03-24-2008 90051 006 \*\*\*\*61.25

<b>DOCUMENT # 728761</b>					
1. Entity Name SAINT EDWARDS EPISCOPAL CHURCH					
Principal Place of Business 460 N GRANDVIEW ST MT DORA, FL 32757 US			Mailing Address 460 N GRANDVIEW ST MT DORA, FL 32757 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1021915	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NETTLE, GORDON T		NAME	Martha Woodson	
STREET ADDRESS	110 N TREMAIN		STREET ADDRESS	312 Juniper Way	
CITY-ST-ZIP	MOUNT DORA, FL 32757		CITY-ST-ZIP	Tavares, FL 32778	
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRONEBAUGH, CHARLES		NAME	Sandra Morgan	
STREET ADDRESS	1710 GOLFSIDE VILLIAGE BLVD		STREET ADDRESS	1535 W. Heim Rd	
CITY-ST-ZIP	APOPKA, FL 32712		CITY-ST-ZIP	Mount Dora, FL 32757	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, ROGER		NAME	William Johnson	
STREET ADDRESS	30329 REDTREE DR		STREET ADDRESS	415 Forest Rd	
CITY-ST-ZIP	LEESBURG, FL 34748		CITY-ST-ZIP	Mount Dora, FL 32757	
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DELIBRO, CAREY		NAME		
STREET ADDRESS	3640 LAKE ELANOR DR		STREET ADDRESS		
CITY-ST-ZIP	MOUNT DORA, FL 32757		CITY-ST-ZIP		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VOLLAND, WOODLEIGH REV.		NAME	Rev. Robert I Maurais	
STREET ADDRESS	500 LAKE FOREST CIRCLE		STREET ADDRESS	175 Groveland Road	
CITY-ST-ZIP	MOUNT DORA, FL 32757		CITY-ST-ZIP	Mount Dora, FL 32757	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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.					
<b>SIGNATURE:</b> <u>Carey Anne Delibro</u>		Date: <u>3/14/08</u>		Daytime Phone # _____	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					