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95 MAY -1 AM 9:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 732350 (4)

1. Corporation Name

ST. CATHERINE'S EPISCOPAL CHURCH, INC.

Principal Place of Business

Mailing Address

**502 DRUID HILLS RD.
TEMPLE TERRACE FL 33617-0853**

**502 DRUID HILLS RD.
TEMPLE TERRACE FL 33617-0853**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/03/1975	3a. Date of Last Report 04/14/1994
4. FEI Number 59-6509496	Applied For Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MOYER CAROLY
8010 BULLARA DR.
TEMPLE TERR. FL 33617**

81 Name John Nertney
82 Street Address (P.O. Box Number is Not Acceptable) 6719 Whiteway Drive
83
84 City Temple Terrace FL
85 Zip Code 33617

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title) (Print Name and Title)

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	T MOYER, CAROLYN 8010 BULLARA DR. TAMPA FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D MANNING, WILLIAM 18112 ANCROFT CT TAMPA FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	PR STADEL, JEROLD R REV 10411 82ND ST N TEMPLE TERR, FL 00000
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D SHOEMAKER, MICHAEL 728 DRUID HILLS TEMPLE TERRACE FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D ROWAN, SUSAN 11204 THERESA ARBOR TEMPLE TERR FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY, ST, ZIP	T John Nertney 6719 Whiteway Drive Temple Terrace, FL 33617 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY, ST, ZIP	D John D. Schmidt 6001 Soaring Ave. Temple Terrace, FL 33617 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY, ST, ZIP	P Ronald Jaynes, Rev. 12221 Wood Duck Pl. Temple Terrace, FL 33617 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY, ST, ZIP	D Mark Guerard 11104 N. 21st St. Tampa, FL 33612 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY, ST, ZIP	D Ann M. Hart 602 Herchel Dr. Temple Terrace, FL 33617 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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.

SIGNATURE:

John Nertney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Nertney

4-26-95

(813) 962-3730