

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 27 AM 11:07

DOCUMENT # **733717** (3)
1. Corporation Name
THE CHURCH OF OUR SAVIOUR (EPISCOPAL) INC.

Principal Place of Business: **C/O REV. TIMOTHY J. SHAW
200 N.W. 3RD ST.
OKEECHOBEE FL 34972**
Mailing Address: **C/O REV. TIMOTHY J. SHAW
200 N.W. 3RD ST.
OKEECHOBEE FL 34972**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/03/1975	3a. Date of Last Report 05/01/1994
4. FEI Number 59-2351322	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
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	

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

9. Name and Address of Current Registered Agent

**SHAW, REV. TIMOTHY J.
200 N.W. 3RD STREET
OKEECHOBEE FL 34972**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 office 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 _____ DATE _____
Signature, typed or printed name of registered agent, and title if applicable. NOTE: Registered Agent signature required when reinstated.

12. OFFICERS AND DIRECTORS

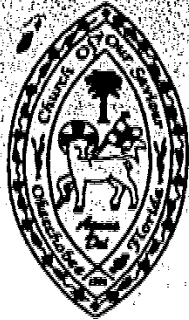
TITLE	PD
NAME	SHAW, TIMOTHY J.
STREET ADDRESS	200 N W 3RD ST
CITY- ST- ZIP	OKEECHOBEE, FL 00000
TITLE	VD
NAME	PHARR, LAURIE
STREET ADDRESS	1504 SE 8TH DRIVE
CITY- ST- ZIP	OKEECHOBEE FL
TITLE	D
NAME	BREWER, FRITZ
STREET ADDRESS	104 SE 16TH STREET
CITY- ST- ZIP	OKEECHOBEE FL
TITLE	TD
NAME	CAUSIER, JAMES
STREET ADDRESS	2444 SW 22ND CIRCLE
CITY- ST- ZIP	OKEECHOBEE FL
TITLE	D
NAME	BURDESHAW, EMILY
STREET ADDRESS	2201 SW 28TH STREET, VILLA 20
CITY- ST- ZIP	OKEECHOBEE FL
TITLE	D
NAME	FULFORD, TIM
STREET ADDRESS	2581 SW 3RD AVENUE
CITY- ST- ZIP	OKEECHOBEE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Bryant, Jerry	
13 STREET ADDRESS	1789 SW 3rd. Ave.	
14 CITY- ST- ZIP	Okeechobee, FL. 34974	
21 TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Myers, James	
23 STREET ADDRESS	2805 SE 36th. Ave.	
24 CITY- ST- ZIP	Okeechobee, FL. 34974	
31 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Giles, James	
33 STREET ADDRESS	2968 Hwy 710	
34 CITY- ST- ZIP	Okeechobee, FL. 34974	
41 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	Rieffel, Karen	
43 STREET ADDRESS	3035 NE 52nd. Drive	
44 CITY- ST- ZIP	Okeechobee, FL. 34972	
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY- ST- ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY- ST- ZIP		

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)(k), 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 addition.

SIGNATURE: *Timothy J. Shaw* 3/22/95 8137634843
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR



733717

CHURCH OF OUR SAVIOUR
EPISCOPAL

200 N.W. 3rd STREET ★ OKEECHOBEE, FL 34972

The Rev. Fr. Timothy J. Shaw
Rector

Office: 813-763-4843
Rectory: 813-763-0552

Handwritten initials: J/S

PD
SHAW, TIMOTHY J.
200 NW 3RD. ST
OKEECHOBEE, FL 34974

VD
PHARR, LAURIE
1504 SE 8TH. DRIVE
OKEECHOBEE, FL. 34974

VD
BRYANT, JERRY
1789 SW 3rd. AVE.
OKEECHOBEE, FL. 34974

change

D
BREWER, FRITZ
104 SE 16TH STREET
OKEECHOBEE, FL. 34974

TD
CAUSIER, JAMES
2444 SW 22ND CIRCLE
OKEECHOBEE, FL. 34974

TD
MYERS, JAMES
2805 SE 36TH AVE.
OKEECHOBEE, FL. 34974

change

D
BURDESAHW, EMILY
2201 SW 28TH STREET, VILLA 20
OKEECHOBEE, FL. #\$(&\$

D
FULFORD, TIM
2561 SW 3RD AVE.
OKEECHOBEE, FL 34974

S
GAIL DAVIS
7517 NW 82ND COURT
OKEECHOBEE, FL. 34972

S
RIEFFEL, KAREN
3035 NE 52ND DRIVE
OKEECHOBEE, FL 34972

change

D
BILLY WAGGAMAN
PO BOX 610
LORIDA, FL 33857-0610

D
ROBBY BROWNING
3610 NW 38TH. AVE.
OKEECHOBEE, FL 34972

D
GILES, JAMES
2968 HWY 710
OKEECHOBEE, FL 34974

add