

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 8:00 am
Secretary of State

01-24-2008 90038 039 ****61.25

DOCUMENT # 739636

1. Entity Name

ST. AGNES EPISCOPAL CHURCH, INC.



Principal Place of Business
3840 LAKEVIEW DR.
SEBRING, FL 33870

Mailing Address
3840 LAKEVIEW DR.
SEBRING, FL 33870

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01152008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-6140704

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

RHODES, DAVID W
370 EAST INTERLAKE BLVD.
LAKE PLACID, FL 33852

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

Filing Fee is \$61.25
Due by May 1, 2008

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

T
NAME RIVENS, ROBERT A. ☐ Delete
STREET ADDRESS 3407 GOLF HAVEN TERR
CITY-ST-ZIP SEBRING, FL 33872

RIVENES, ROBERT A. ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

D
NAME EIDENBERGER, SANDRA ☐ Delete
STREET ADDRESS 3011 DUFFER RD
CITY-ST-ZIP SEBRING, FL 33872

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

V
NAME COOPER, FLORENCE ☒ Delete
STREET ADDRESS 4406 PITCHING WEDGE WAY
CITY-ST-ZIP SEBRING, FL 33870

V RHODES, DAVID W. ☐ Change ☒ Addition
NAME 204 LAKE JUNE ROAD
STREET ADDRESS LAKE PLACID, FL 33852
CITY-ST-ZIP

VD
NAME TOUSEY, WILLIAM ☐ Delete
STREET ADDRESS 212 SPARROW AVE
CITY-ST-ZIP SEBRING, FL 33872

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

PD
NAME KURTZ, JAMES E ☐ Delete
STREET ADDRESS 4004 ANN AVENUE
CITY-ST-ZIP SEBRING, FL 33870

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

S
NAME RHODES, DAVID W ☒ Delete
STREET ADDRESS 204 LAKE JUNE ROAD
CITY-ST-ZIP LAKE PLACID, FL 33852

S INABNETT, DIANE ☐ Change ☒ Addition
NAME 4630 LEWIS AVENUE
STREET ADDRESS SEBRING, FL 33875
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.

SIGNATURE:

Robert A. Rivenes ROBERT A. RIVENES

01/21/08

863-385-7649

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #