2000 UNIFORM BUSINESS REPORT (UBR) **FILED DOCUMENT # 739879** Feb 16, 2000 8:00 am Secretary of State 1. Entity Name ST. MARY'S CHURCH, INC. 02-16-2000 90058 014 ****61.25 Principal Place of Business Mailing Address

311 SAN MIGUEL AMPA FL 33629		4311 SAN MIGUEL TAMPA FL 33629-5623		}				
6 : · · · · · · · · · · ·		3. Mailing Address						
Principal Place of Business		3. Maining Address						
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc. City & State			DO NOT WRITE IN THIS SPACE			
				4. FEI Numi	4. FEI Number Applied For Not Applicable			
Zip	Country	Zip	Country	5. Certificat	e of Status Desired	\$8.75 Add Fee Required]
6. Name and Address of Current Re		egistered Agent		7. Name an	7. Name and Address of New Registered Agent			
			Name	Marilur	Healy	. <u> </u>	"	
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3407 W MORRISON AVE TAMPA FL 33629			401	. E. Jack	KSCN 54., 9	Drive	2000	
IMMEATI	L 00023		City -	Tamin		L Zin Coole	202	
The above	e named entity submits this statement for	the purpose of changing its	realistered office or	registered agent, or b	oth, in the state of Florida.	<u> </u>		1
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IGNATURE	Signature, typed or printed name of egistered agent a	and title if applicable.	E: Registered Agent signal	re required when reinstating)	DATE			
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م سود بر بيست.	FII F NOW-	9. Election Campaign	n Financing	\$5.00 May Bo	Make Check		والمتعدد وووهو والمتدارين	
و سود پر پوست.	FILE NOW: FEE IS \$61.25	9. Election Campaigr Trust Fund Contrib	~ —	\$5.00 May Be Added to Fees	Make Check	Payable to		
پ سوس پر پېښدن.	FILE NOW: FEE IS \$61.25	, ,	~ —	Added to Fees	Make Check Departmen	c Payable to		
0	FEE IS \$61.25 OFFICERS AND DIR	Trust Fund Contrib	~ —	Added to Fees	Make Check	Payable to	10	
TLE	OFFICERS AND DIR	Trust Fund Contrib	11.	Added to Fees	Make Check Departmen	c Payable to		(66/6
TLE AME	OFFICERS AND DIR PD DONLON, KEVIN FRANCIS	Trust Fund Contrib	11. TITLE NAME	Added to Fees	Make Check Departmen	Payable to	10	37 (9/99)
TLE AME TREET ADORESS	PD DONLON, KEVIN FRANCIS 3311 SAN JOSE	Trust Fund Contrib	11. TITLE NAME STREET ADDRESS	Added to Fees	Make Check Departmen	Payable to	10	E037 (9/99)
TLE AME TREET ADORESS ITY-ST-ZIP	PD DONLON, KEVIN FRANCIS 3311 SAN JOSE TAMPA FL	Trust Fund Contrib	T11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees ADDITIONS/C	Make Check Departmen HANGES TO OFFICERS AND D	C Payable to nt of State DIRECTORS IN Change	10 Addition	3R2E037 (9/99)
TLE AME TREET ADORESS ITY-ST-ZIP TLE	PD DONLON, KEVIN FRANCIS 3311 SAN JOSE TAMPA FL	Trust Fund Contrib	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees ADDITIONS/C	Make Check Departmen HANGES TO OFFICERS AND D	C Payable to nt of State DIRECTORS IN Change	10	CR2E037 (9/99)
TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME	PD DONLON, KEVIN FRANCIS 3311 SAN JOSE TAMPA FL VD QUINLAN, JAMES G	Trust Fund Contrib	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees ADDITIONS/C	Make Check Departmen	C Payable to nt of State DIRECTORS IN Change	10 Addition	CR2E037 (9/99)
TLE AME TREET ADORESS ITY-ST-ZIP TLE	PD DONLON, KEVIN FRANCIS 3311 SAN JOSE TAMPA FL VD QUINLAN, JAMES G 4537 W SWANN AVE	Trust Fund Contrib	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees ADDITIONS/C	Make Check Department HANGES TO OFFICERS AND E	C Payable to nt of State DIRECTORS IN Change	10 Addition	CR2E037 (9/99)
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Change

- Addition