


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 14, 2007 8:00 am**  
**Secretary of State**

02-14-2007 90065 032 \*\*\*\*61.25

<b>DOCUMENT # 742490</b> 1. Entity Name ALL SAINTS ANGLICAN CHURCH, INC.	
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Principal Place of Business 1250 STATE ROAD 19 SOUTH PALATKA FL 32177	Mailing Address PO BOX 597 PALATKA FL 32178
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE      CR2E037 (10/06)

<b>6. Name and Address of Current Registered Agent</b>  GARRIS, GREGORY 340 EAST PENIEL RD. PALATKA FL 32177	<b>7. Name and Address of New Registered Agent</b>  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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	TR WOOD, DICK 121 SILVER LAKE DR. INTERLACHEN FL 32148	TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Treasurer Michele Fudo 108 Linda Lane Palatka, FL 32177
NAME	S TICKNER, JUDY 2139 NE 3RD ST. OCALA FL 34471	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	T TRUMBLE, TOM 210 OLD PENIEL RD. PALATKA FL 32177	STREET ADDRESS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Trustee Tom Trumble 210 Old Peniel Rd. Palatka, FL 32177
CITY- ST- ZIP	TR JACOBS, JOHN R 521 SOUTH 17TH STREET PALATKA FL 32177	CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY- ST- ZIP	TR GARRIS, GREG 340 EAST PENIEL RD. PALATKA FL 32177	CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY- ST- ZIP	TR COTTRILL, CHARLIE 355 E BUFFALO BLUFF SATSUMA FL 32189	CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Michele Fudo      Michele Fudo      2/5/07 (386) 328-6581

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Office Phone #