2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744528

FILED Apr 30, 2006 Secretary of State

Entity Name: ALL SAINTS' EPISCOPAL CHURCH, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: 1700 KEYSTONE RD 1700 KEYSTONE RD TARPON SPRINGS, FL 346887579 TARPON SPRINGS, FL 34688 **Current Mailing Address: New Mailing Address:** 1700 KEYSTONE RD 1700 KEYSTONE RD TARPON SPRINGS, FL 34688 TARPON SPRINGS, FL 34689 US US FEI Number: 59-6161794 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CREAMER, FRANK C REV CREAMER, FRANK C REV 1700 KEYSTONE RD 1700 KEYSTONE RD TARPON SPRINGS, FL 34689 US TARPON SPRINGS, FL 34688 US 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. SIGNATURE: 04/30/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition JOHNSON, RANDALL BROOKS, THOMAS Name: Name: 887 ROYAL BIRKDALE DR Address: 1810 LEXINGTON PLACE Address: City-St-Zip: TARPON SPRINGS, FL 34688 City-St-Zip: TARPON SPRINGS, FL 34688 Title: PD () Delete Title: () Change () Addition CREAMER, FRANK C Name: Name: Address: 1700 KEYSTONE RD Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: () Delete Title: (X) Change () Addition SCOTT, JUDY SCUTT, JUDY Name: Name: Address: 147 HIGHLAND RD Address: 147 HIGHLAND RD City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34689 Title: () Delete Title: () Change () Addition Name: KINNEY, ROBERT P Name: 6325 RIDGE TOP DRIVE Address: Address: City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: Title: () Delete Title: (X) Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

CLARK, JOHN

9739 TOM STREET

HUDSON, FL 34669

SIGNATURE: ROBERT P. KINNEY T 04/30/2006

DITMORE, GEORGE

1600 DAVENPORT DR

NEW PORT RICHEY, FL 34655

Name:

Address:

City-St-Zip: