

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **745689 (0)**  
1. Corporation Name  
**ANGLICAN CHURCH OF THE INCARNATION, INC.**



Principal Place of Business: 1515 EDGEWATER DRIVE ORLANDO FL 32804  
Mailing Address: 1515 EDGEWATER DRIVE ORLANDO FL 32804

3. Date Incorporated or Qualified: **01/24/1979**  
3a. Date of Last Report: **05/01/1995**  
4. FEI Number: **59-1881287**  
Applied For:  Not Applicable  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21  
2a. Mailing Address: 26  
22. State, Apt. #, etc.: 27  
23. City & State: 28  
24. Zip: 25 Country: 29 Zip: 30 Country: 30

9. Name and Address of Current Registered Agent  
**ALLEN, W. RILEY  
228 ANNIE STREET  
ORLANDO FL 32806**

10. Name and Address of New Registered Agent  
81 Name:  
82 Street Address (P.O. Box Number is Not Acceptable):  
83  
84 City: **FL** 85 Zip Code:

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature must be printed name of registered agent and filed if applicable. (NOIL - Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	CAMPESE, LOUIS	
STREET ADDRESS	2341 MARKINGHAM ROAD	
CITY - ST - ZIP	MAITLAND, FL 00000	
TITLE	S	<input type="checkbox"/> DELETE
NAME	CAMPESE, JEFF	
STREET ADDRESS	1405 ENTERPRISE/OSTEEN RD	
CITY - ST - ZIP	DELTONA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GREENHAW, THOMAS D.	
STREET ADDRESS	1817 JESSICA COURT	
CITY - ST - ZIP	WINTER PARK FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	HANSEN, CARLA M.	
STREET ADDRESS	1105 BRIELLE COURT	
CITY - ST - ZIP	OVIEDO FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 address.

SIGNATURE: Carla M. Hansen **Carla M. Hansen** 1-21-96 407-843-2886  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/In a Phone #

CR2E037 (12/95)