

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # 747192 1. Entity Name SAINT GILES CHURCH, EPISCOPAL, INC.	
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Principal Place of Business 8271 52ND ST NORTH PINELLAS PARK, FL 33781	Mailing Address 8271 52ND ST NORTH PINELLAS PARK, FL 33781
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02152006 No Chg-NP CRZE037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-6181589	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WASSON, SANDRA 8381 56TH WAY NORTH PINELLAS PARK, FL 34665

**DO NOT WRITE
IN THIS SPACE**

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: Sandra Wasson 2/22/06
Registered Agent or Printed Name of Registered Agent and Title is required. (SEE INSTRUCTIONS) Registered Agent Signature required when re-registering. DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11111111465764
03/22/06-80044-016 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HARTNETT, JOHN L REV. 12151 N72ND WAY LARGO, FL 33773
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D COLLUM, WALTER 3816 108TH AVENUE N. CLEARWATER, FL 33762
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TRIMBLE, BRIAN 2083 59TH STREET N. ST. PETERSBURG, FL 33710
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FIELDS, LISE 6609 10TH STREET N. ST PETERSBURG, FL 33702
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WASSON, SANDRA 8381 56TH WAY NORTH PINELLAS PARK, FL 33781
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LOFGREN, GENE 5220 90TH TERRACE NORTH PINELLAS PARK, FL 33782

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 139, 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: Sandra Wasson 2/22/06 (727) 544-5949
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR