

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757512

FILED
Feb 05, 2008
Secretary of State

Entity Name: EPISCOPAL CHURCH OF THE ASCENSION, INCORPORATED

Current Principal Place of Business:

4950 S APOPKA VINELAND RD
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

4950 S APOPKA VINELAND RD
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 59-2487173

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SORVILLO, SR., JAMES REV.
4950 S APOPKA VINELAND ROAD
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: HUNGATE, ROBERT
Address: 5523 CEDAR PINE DR
City-St-Zip: ORLANDO, FL 32619

Title: DT () Delete
Name: BECKWITH, ANN
Address: 10255 EMERALD WOODS AVE
City-St-Zip: ORLANDO, FL 32856

Title: D () Delete
Name: YEAPLE, BOB
Address: 8313 VIA ROSA
City-St-Zip: ORLANDO, FL 32836

Title: DC () Delete
Name: SORVILLO, SR., JAMES REV.
Address: 9101 PALM TREE DR
City-St-Zip: WINDERMERE, FL 34786

Title: DMP () Delete
Name: IRELAND, TERRY
Address: 8060 MONIER WAY
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: SCHWAB, KATHY
Address: 4326 LAKE UNDERHILL APT A
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DS (X) Change () Addition
Name: WILLIAMS, DAVID
Address: 454 Highbrooke Blvd
City-St-Zip: Ocoee, FL 34761

Title: DT (X) Change () Addition
Name: PIGNONE, FRANK
Address: 6003 JAMESTOWN PARK
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DMP (X) Change () Addition
Name: ARCHER, ANN
Address: 11462 Willow Gardens Dr
City-St-Zip: WINDERMERE, FL 34786

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: THE REV JAMES SORVILLO, SR.

DC

02/05/2008

Electronic Signature of Signing Officer or Director

Date