


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2007 8:00 am
Secretary of State

02-08-2007 90045 005 ****61.25

DOCUMENT # 758482 1. Entity Name ST. MICHAEL AND ALL ANGELS ANGLICAN CHURCH, INC.					
Principal Place of Business 5041 LAKESHORE DR WEST ORANGE PARK, FL 32003			Mailing Address 5041 LAKESHORE DR. WEST JACKSONVILLE, FL 32203		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State Orange Park FL		4. FEI Number 59-2857098	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 32003		Country		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent WELLS, LAURENCE K 5041 LAKESHORE DR. WEST ORANGE PARK, FL 32003			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;">FL Zip Code</div>		
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. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE Laurence K. Wells <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 40%; text-align: right;"> 3 Feb 2007 <small>DATE</small> </div> </div>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAGDON, RETTA 7418 ORTEGA HILLS DR JACKSONVILLE, FL 32244	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARY CAIN 3150 TWILIGHT CT MIDDLEBURG FL 32068	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, HIGH 6007 WEST SHORES RD. ORANGE PARK, FL 32003	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WELLS, LAURENCE K. 2746 ST JOHNS AVE JACKSONVILLE, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOOPER, DAN 2549 HALPERN'S WAY LIVE OAK, FL 32064z	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2549 HALPERN'S WAY MIDDLEBURG FL 32068	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CAIN, KAYE 771 HARDWOOD ST ORANGE PARK, FL 32065	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JOHNSON, JOYCE 4561 TARRAGON RD MIDDLEBURG FL 32068	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KORI, KATHY 2852 NAVAJO RD. ORANGE PARK, FL 32065	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS 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 Chapter 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: Laurence K Wells <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<div style="display: flex; justify-content: space-between;"> <div> 3 Feb 2007 <small>Date</small> </div> <div> 904-388-1031 <small>Daytime Phone #</small> </div> </div>		

40011116



01292007 Chg-NP CR2E037 (12/06)

ATTACHMENT 40011772

ST MICHAEL AND ALL ANGELS ANGLICAN CHURCH INC
Doc #758482

Box 10

PD
WELLS, LAURENCE K.
2746 ST JOHNS AVENUE
JACKSONVILLE FL 32205

VPD
HUGH WHITE
6007 WEST SHORES RD
ORANGE PARK FL 32003

D.
CAIN, GARY
3180 TWILIGHT CT
MIDDLEBURG FL 32068

D
JOHNSON, JOYCE
4561 TARRAGON RD
MIDDLEBURG FL 32068

D
KORI, CATHY
2852 NAVAJO RD
ORANGE PARK FL 32065

D
HOOPER, DAN
2549 HALPERN'S WAY
MIDDLEBURG FL 32068