

# 2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 765991

FILED  
Oct 08, 2013  
Secretary of State

**Entity Name:** ST. PHILIP'S EPISCOPAL CHURCH, INC.

**Current Principal Place of Business:**

1121 ANDALUSIA AVE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

1121 ANDALUSIA AVE  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 59-0624448

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CONROY, MARY E REV DR  
ST PHILIP'S EPISCOPAL CHURCH  
1121 ANDALUSIA AVE  
CORAL GABLES, FL 33134 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:** MARY E. CONROY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CONROY, MARY E  
**Address:** 1535 SIENA AVE  
**City-St-Zip:** CORAL GABLES, FL 33146

**Title:** D  
**Name:** SLESNICK, JEANNETT  
**Address:** 827 N GREENWAY DR  
**City-St-Zip:** CORAL GABLES, FL 33134

**Title:** D  
**Name:** PONCE, SCOTT  
**Address:** 4415 ANDERSON RD  
**City-St-Zip:** CORAL GABLES, FL 33146

**Title:** T  
**Name:** DOWLEN, LON  
**Address:** 6463 SUNSET  
**City-St-Zip:** S. MIAMI, FL 33143

I hereby 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 all other like empowered.

**SIGNATURE:** MARY E. CONROY

P

10/08/2013

Electronic Signature of Signing Officer or Director

Date