

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 21, 2003 8:00 am**  
**Secretary of State**

02-21-2003 90846 033 \*\*\*\*61.25

**DOCUMENT # 768991**

1. Entity Name  
**EPISCOPAL CHRISTIAN CARING FUND OF CENTRAL FLORIDA, INC.**



Principal Place of Business  
**1017 E ROBINSON ST  
ORLANDO FL 32801-2023**

Mailing Address  
**1017 E. ROBINSON ST  
ORLANDO FL 32801-2023  
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2367721**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**THOMAS, ROBERT  
922 GOLFSIDE DR  
P.O. BOX 5075  
WINTER PARK FL 32793**

7. Name and Address of New Registered Agent

Name **HOMER S. VANTURE, JR**  
Street Address (P.O. Box Number is Not Acceptable)  
**322 JENNIE JEWEL DR**  
City **ORLANDO** FL Zip Code **32806**

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 *Homer S. Vanture, Jr.* **HOMER S VANTURE, JR TREASURER** 2/18/03  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

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

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DVP NORVILLE, COLBERT PO BOX 10176 DAYTONA BEACH FL 32120</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D MERCER, MARVERN 7902 SOUTH A1A MELBOURNE BEACH FL 32951</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DT THOMAS, ROBERT 922 GOLFSIDE DR WINTER PARK FL 32792</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DS GILMAN, PATTI 1310 SE 3RD ST OCALA FL 34471</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP TOWNSEND, PATRICIA 5021 BURMUDA CIRCLE ORLANDO FL 32808-1730</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D VANTURE, HOMER 322 JENNIE JEWEL DR ORLANDO FL 32806</b>	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BERTSCH, ANNEKE 501 SOUTH SONORA CIRCLE INDIANATLANTIC, FL 32903</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BRDKAW, RONALD 1106 DORCHESTER ST ORLANDO, FL 32803</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D THOMAS, ROBERT</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D DORSETT, LYDIA 311 E MORSE BLVD, BLDG-7, APT-2. WINTER PARK, FL 32789</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D GILMAN, MARY LOU 4900 NW 27th AVE OCALA, FL 34475</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DT VANTURE, HOMER</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *HOMER S. VANTURE, JR.* **HOMER S VANTURE, JR TREASURER** 2/18/03 407-356-5886

CR2E037 (10/02)

Attachment 768991  
70017866

Block 11 (Continued)

Add:

**Poitras, Ted**  
**27 Lake Hamilton Beach**  
**Haines City, FL 33844**

**Sprott, Woody**  
**123 Homewood Dr.**  
**Winter Haven, FL 33880-6340**

**Walker, David**  
**1513 Bassage Road**  
**Sebring, FL 33872-3021**