

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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* 2/18/03 407-356-5886

CR2E037 (10/02)

Attachment 768991

70017866

Block 11 (Continued)

Add:

Postras, 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