2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2009
Secretary of State

DOCUMENT# 769887

Entity Name: ST. MARTIN'S EPISCOPAL CHURCH OF PASCO COUNTY, INC.

Current Principal Place of Business:

15801 US HWY 19
HUDSON, FL 34667

New Principal Place of Business:

Current Mailing Address:

15801 US HWY 19
HUDSON, FL 34667

New Mailing Address:

FEI Number: 59-2316629 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WRIGHT, CHRISTOPHER
7232 STAGHORN DR.
SPRING HILL, FL 34607 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:	DP	( ) Delete
Name:	DOPP, REV.WILLIAM F	
Address:	14101 BEECH TREE COURT	
City-St-Zip:	HUDSON, FL 34667	
Title:	D	( ) Delete
Name:	WRIGHT, CHRISOTPHER	
Address:	7232 STAGHORN DR.	
City-St-Zip:	SPRING HILL, FL 34607	
Title:	TD	( ) Delete
Name:	PELC, CHESTER	
Address:	11647 WHEATFIELD LOOP	
City-St-Zip:	HUDSON, FL 34667	
Title:	SD	( ) Delete
Name:	MONICAL, ANN	
Address:	13731 COCO AVE.	
City-St-Zip:	HUDSON, FL 34667	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	SD	(X) Change ( ) Addition
Name:	COLE, RAY	
Address:	330 FOREST WOOD CT	
City-St-Zip:	SPRING HILL, FL 34609	

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: RAY COLE SD 01/19/2009

Electronic Signature of Signing Officer or Director — Date