FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 771192

(2)

ST. STEPHEN'S EPISCOPAL CHURCH, INC.								
Principal Place	e of Business	Mailing Address	Mailing Address			-{	IDII BADII DIAM	## (# # # # # # # # # # # #
2750 MCFARLANE ROAD 2750 MCFARLANE ROAD COCONUT GROVE FL 33133 COCONUT GROVE FL						3. Date Incorporated or Qualified		
						4. FEI Number 59-0638488	\- 	pplied For
2. Principal P	lace of Business	2e. Mailing Address 26				5. Certificate of Status Desired	\$8.75	Additional teguired
Sulte, Apl	#, etc.	Suite, Apt. #, etc.			W	Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be
City & State	В	City & State				7. Is this nonprofit corporation a homeowners association?		
Zip 24	Country 25	Zip	Countr 30			This corporation owes or has paid the cu Personal Property Tax due June 30.		ntangible No
	9. Name and Address of Curi		1001			10. Name and Address of New Registered		
		-		81	Name			
COLLINS, MARGARET 8460 SW 156 PL #714				82	Street Addre	Address (P.O. Box Number is Not Acceptable)		
MIAMI FI			ľ	83				
				84	City	FL	85 Zip	Code
SIGNATURE	to the provisions of Sections 617.0 egistered agent, or both, in the Stem familiar with, and accept the ob- Signature, typed or printed name of registered					oration submits this statement for the purpose on's board of directors. I hereby accept the appointment of the purpose of when reinstating) DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	R	☐ DELETE	1.1 10	LE			☐ Change	Addition
NAME	MCCLOSKEY, ROBERT J.		1.2 NAME					
STREET ADDRESS	2750 MCFARLANE RD.				ADDRESS			
CITY-ST-ZIP	MIAMI FL			1.4 CITY-ST-ZIP			Change	Addition
TITLE	<u> </u>			2.1 TITLE 2.2 NAME			☐ Criange	☐ ¥00II00II
NAME	DENTON, BONELL				1000500	·		
STREET ADDRESS	5935 S.W. 29 ST. Miami Fl		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		1			
CITY-ST-ZIP TITLE	C C	DELETE	2.4 CI 3.1 TIT		<u> </u>		Change	Addition
NAME	BAILEY, GUY		3.2 NAM		مد ا	•		
STREET ADDRESS	441 RIDGE RD.				ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL 33143		3.4. CI		T-71P			
TITLE	1	≥ DELETE	4.1 Til		7	HANCELLOR ACARTHUR DOUGLAS 2406W835TPLZC9	Change	Addition
NAME	ROSS, TIM		4.2 N/	ME	M	ACARTHUR DOUGLAS		
STREET ADDRESS	3924 HARDIE RD.		4.3 ST	REET	ADORESS つる	2406W835TPLEC9		
CITY-ST-ZIP	MIAMI FL		4.4 C/I	Y-\$1	T-ZIP M	7am +, FL 33143		
TITLE	С	X DELETE	5.1 Trī	LE		<i>S</i> '	☐ Change	Addition
NAME	MADEIRA, DUANE		5.2 NA	ME	A	RDYTH WALKER		
STREET ADDRESS	7730 CAMINO REAL				ADDRESS 8	221 SW72 AV## 380		
CITY-ST-ZIP	MIAMI FL		5.4 CIT		T-ZIP /	151411, FL 33143	T Observe	4.430/
TITLE	D DAVED	DELETE	6.1 TIT		Ţ),	GLINDA HARPER	☐ Change	Addition
NAME	HAYS, DAVID			6.2 NAME ASSTREET ADDRESS		29 ALTARA AUG		
STREET ADDRESS					ADDRESS	29 ITCI MICK FILE	. 11 1	
CITY-ST-ZIP	CUMAL GABLES FL 33134	Lwith this filing does not evalid	6.4 Cf1	Y-\$1	rion stated in S	Section 119.07(3)(1), Florida Statutes. I further ce shall have the same legal effect as if made up	ertify that th	a Information
indicated	on this annual report or supplieme	mtal annual report is true and a	ccurate and	i tha	at my signatur	e shall have the same legal effect as if made up	nder oath; th	nat lam an

SIGNATURE:

indicated on inits annual report of supplemental enfoat report is true and accounted and that my signature shall have the same legal effect as it made under oath; that I am a 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 12 or Block 13 if changed or on an attackment with an address.

GNATURE:

GNATURE:

FILED

Feb 16 1998 8:00am

Secretary of State