1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 771192

1. Corporation Name

FILED Feb 20, 1999 8:00 am Secretary of State 02-20-1999 90149 029 ****61.25

ST. STEPHEN'S EPISCOPAL CHURCH, INC.					87.1.51971.49729 1 **		
Principal Place of Business 2750 MCFARLANE ROAD COCONUT GROVE FL 33133 COCONUT GROVE FL							
Principal Place of Business 2a. Mailing Address					Date Incorporated or Qualifed		
Suite, Apt. #, etc. 26 Suite, Apt. #, etc.					11/14/1983	•	
22 27 27					4. FEI Number	. 1	Applied For
City & State					59-0638488		Not Applicable
Zip Country 28					5. Certifcate of Status Desired	□ \$8.73	5 Additional
4		Zip	Co	untry	6. Election Campaign Financing	Fee	Required
9. Name and Address of Current Registered Agent			30		Trust Fund Contribution		
		Art registered Agent			10. Name and Address of New Re	Adde	d to Fees
COLLI	NS, MARGARET			81 Name		Brassian Wildlift	
8460 SW 156 PL #714				82 Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL 33193				83		e)	
				63			
				84 City			
1. Pursua office	ant to the provisions of Sections 617.05)2 and 617,1508. Florida Statut	es the el			FI 85 Zip	Code
agent,	I am familiar with, and accept the obliga	of Florida. Such change was a	uthorized	by the corporation	oration submits this statement for the purion's board of directors. I hereby accept the	pose of changing it	s registered
IGNATUR	₹E		rida Statu	tes.	thereby accept the	ie appointment as r	egistered
	age	nt and title if applicable (NOTE	· Pacietame /		· .		ĺ
LE	R OFFICERS AN	ID DIRECTORS	13.	gent signature required		DATE	
 ME	(☐ DELETE	1.1 TITL	E	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	ORS IN 12
EET ADDRES	MCCLOSKEY, ROBERT J. 2750 MCFARLANE RD.		1.2 NAV	ie	•	☐ Change	☐ Addition
Y-ST-ZIP	MIAMI FL		1.3 STR	EET ADDRESS	•		
.E	D		1.4 C/TY	1			
Æ	DENTON, BONELL	☐ DELETE	2.1 TITLE			· · · ·	
EET ADDRES			2.2 NAM		•	☐ Change	☐ Addition ☐
-ST-ZIP	MIAMI FL		2.3 STRE	ET ADDRESS		. *	.
E	D		2. 4 CITY	ST-ZIP			}
E	BAILEY, GUY	DELETE	3.1 TITLE			Change	
ET ADDRESS	441 RIDGE RD.		3.2 NAME		•	C Change	☐ Addition
ST-ZIP	CORAL GABLES FL 33143			T ADDRESS			·
	C	☐ DELETE	3.4. CITY-	ST-ZIP			
Í	MACARTHUR, DOUGLAS		4.1 TITLE	[☐ Change	Addition
	7240 SW 83ST PL 2C9		4. 2 NAME	;			
ST-ZIP	MIAMI FL 33143		ŧ	TADDRESS			
į	S ADDITION AND ADDITION ADDITION AND ADDITIO	☐ DELETE	4.4 CITY-S 5.1 TITLE	1-219			
TADDRESS	WALKER, ARDYTH 8221 SW 72 AVE #380		5.2 NAME	1		☐ Change	Addition
ST-ZIP	MIAMI FL 33143		5.3 STREET	ADDRESS			-
- LIF	D D	<u> </u>	5.4 CITY-S1	,	***		
1	HARPER, MELINDA	☐ DELETE	6.1 TITLE			1.5.	.
FADDRESS	629 ALTARA AVE		6.2 NAME	1		☐ Change	Addition
T-ZIP	CORAL GABLES FL 3314		6.3 STREET	ADDRESS		•	
<u> </u>		a di	6 4 OFF 0*	1			· ·

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 annual report or supplemental annual 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 a specific control 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 the corporation of the corporation or the receiver or trustee empowered.