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FILED

Feb 24 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # C10007 (8)

1. Corporation Name

SAINT PAUL'S PROTESTANT EPISCOPAL CHURCH OF KEY
WEST, FLORIDA

Principal Place of Business

401 DUVAL ST.
KEY WEST FL 33040

Mailing Address

C/O HARRY F KNIGHT
1016 FLAGLER AVE.
KEY WEST FL 33040-4816
US3. Date Incorporated or Qualified
06/19/19923a. Date of Last Report
02/15/19964. FEI Number
59-2368463Applied For
Not Applicable5. Certificate of Status Desired ☒\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29

Country

30

9. Name and Address of Current Registered Agent

KNIGHT, HARRY F.
1016 FLAGLER AVENUE
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME JOHNSON, KEITH
STREET ADDRESS 401 DUVAL ST.
CITY - ST - ZIP KEY WEST FL 33040TITLE D ☒ DELETE
NAME CURRY, DONALD R
STREET ADDRESS 401 DUVAL ST.
CITY - ST - ZIP KEY WEST FL 33040TITLE D ☒ DELETE
NAME PINDER, JOE
STREET ADDRESS 401 DUVAL ST.
CITY - ST - ZIP KEY WEST FL 33040TITLE D ☒ DELETE
NAME SANDS, LEON
STREET ADDRESS 401 DUVAL ST.
CITY - ST - ZIP KEY WEST FL 33040TITLE D ☐ DELETE
NAME ADAMS, DAVID
STREET ADDRESS 401 DUVAL ST.
CITY - ST - ZIP KEY WEST FL 33040TITLE D ☐ DELETE
NAME TAYLOR, LOUISE
STREET ADDRESS 401 DUVAL ST.
CITY - ST - ZIP KEY WEST FL 33040

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME GRANIELA, KEVIN
1.3 STREET ADDRESS 401 DUVAL ST.
1.4 CITY - ST - ZIP KEY WEST FL 330402.1 TITLE D ☐ Change ☒ Addition
2.2 NAME BUTLER, GINGER
2.3 STREET ADDRESS 401 DUVAL ST.
2.4 CITY - ST - ZIP KEY WEST FL 330403.1 TITLE D ☐ Change ☒ Addition
3.2 NAME WALKER, DOUG
3.3 STREET ADDRESS 401 DUVAL ST.
3.4 CITY - ST - ZIP KEY WEST FL 330404.1 TITLE D ☐ Change ☒ Addition
4.2 NAME GISH, JOHN
4.3 STREET ADDRESS 401 DUVAL ST.
4.4 CITY - ST - ZIP KEY WEST FL 330405.1 TITLE D ☐ Change ☒ Addition
5.2 NAME KNIGHT, HARRY F. SR.
5.3 STREET ADDRESS 401 DUVAL ST.
5.4 CITY - ST - ZIP KEY WEST FL 330406.1 TITLE D ☐ Change ☒ Addition
6.2 NAME ACEVEDO, RANDY
6.3 STREET ADDRESS 401 DUVAL ST.
6.4 CITY - ST - ZIP KEY WEST FL 33040

14. I do 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 Block 12 or Block 13 if changed, or on an attachment with an address.

HARRY F. KNIGHT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0024563

CR2E037 (9/96)

D
ZEH, DAVID A
401 DUVAL ST.
KEY WEST FL 33040

D
HIGHSMITH, SANDY A
401 DUVAL ST
KEY WEST FL 33040

D
HARRIS, NAT A
401 DUVAL ST.
KEY WEST FL 33040

D
NOEL, GEORGE A
401 DUVAL ST.
KEY WEST, FL 33040

D
SWEETING, ROGER A
401 DUVAL ST.
KEY WEST, FL 33040

ST. PAUL'S EPISCOPAL CHURCH DUVAL & EATON KEY WEST, FL
THE CHURCH was begun in 1831 at the request of the City Council in a petition to the Bishop of New York to send a priest and establish a parish. The Rev. Sanson K. Brunot was sent as the first Rector and the first service was held on Christmas Day, 1832. On that day, the congregation signed the "Act of Association" of the Episcopal congregation in Key West to be called St. Paul's Church. The first Vestry was elected on April 8, 1833.

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THE MINISTERS OF ST. PAUL'S

The Rt. Rev. Calvin O. Schofield, Jr.	The Bishop of Southeast Florida
The Rt. Rev. John L. Said	Bishop Suffragan of Southeast Florida
The Rev. Paul A. Rasmus - Rector	The Rev. Patricia Geerdes - Assistant to the Rector
Mrs. Brenda Rasmus - Parish Secretary	Mr. Joseph Lowe - Organist/Choir Director
Mr. Charles Bradford, Jr. - Treasurer	Mrs. Sarah Fowler - Lay Eucharistic Minister
Mrs. Winifred Fryzel - Archivist	Mr. Hugh Papy - Chancellor
Mrs. Mary Breedlove - Sunday School Superintendent	Ms. Mary Ann Starrett - Sexton

THE VESTRY

Mr. David Adams - Clerk ✓	Mr. Doug Walker ✓	Mrs. Sandy Highsmith ✓
Mrs. Louise Taylor ✓	Mr. John Gish ✓	Mr. Nat Harris ✓
Mr. Keith Johnson ✓	Mr. Harry F. Knight, Sr. ✓	Mr. George Noel ✓
Mr. Kevin Graniela ✓	Mr. Randy Acevedo ✓	Mr. Roger Sweeting ✓
Mrs. Ginger Butler ✓	Mr. David Zeh ✓	

And our Chalice Bearers, Lay readers, Lectors, Choir, Altar Guild, Acolytes, Episcopal Church Women, Daughters of the King, Integrity Chapter, Volunteers, the Sunday School children and teachers, and ALL the members of St. Paul's.

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OFFICE Hours: Monday - Friday 8:30am to 4:30pm Tel: 296-5142 Fax: 294-6687

MAILING ADDRESS - PO Box 1014 - Key West, FL 33041

RECTORY - 415 Duval Street 292-3266

MOTHER PATRICIA - 3435 Riviera Drive 296-4619

Please make appointments for Baptisms and Marriages far enough in advance to allow for required instruction and preparation. In case of illness, hospitalization, or death, please notify the Rector or Assistant Rector at once.