2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034058

FILED Jul 08, 2009 Secretary of State

Entity Name: ST. THOMAS EPISCOPAL CHURCH ENDOWMENT FUND, L.L.C.

Current Principal Place of Business: New Principal Place of Business: 5690 S.W. 88 STREET CORAL GABLES, FL 33156 **Current Mailing Address: New Mailing Address:** 5690 S.W. 88 STREET CORAL GABLES, FL 33156 FEI Number: 59-0751930 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRAWNER, PHILIP L ESQ. 2655 LE JEUNE ROAD SUITE 302 CORAL GABLES, FL 33134 US 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 MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete FERNANDEZ, SERGIO Name: Name: 6525 SW 134 DR Address: Address: City-St-Zip: PINECREST, FL 33156 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MALLOY, JOHN Name: Name: Address: 4870 SW 82 STREET Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: Title: SEC () Delete Title: () Change () Addition NEWMAN, JULI Name: Name: Address: 935 ESCOBAR AVE Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: () Delete Title: MGRM Title: () Change () Addition Name: O'SULLIVAN, JOSEPHINA Name: 6090 SW 108TH STREET Address: Address: City-St-Zip: PINECREST, FL 33156 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RICE, DOUGLAS Name: Name: 8241SW 54TH AVE Address: Address: City-St-Zip: MIAMI, FL 33143 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BALES, THOMAS Name: Name: Address: 9151 ARVIDA LANE Address: CORAL GABLES, FL 33156 City-St-Zip: City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: REBECCA PARKER MS. 07/08/2009