2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 07, 2007 8:00 am Secretary of State DOCUMENT # N0000000355 1. Entity Name 02-07-2007 90051 011 ****61.25 ST. PHILIP'S EPISCOPAL CHURCH OF POMPANO BEACH, INC. Principal Place of Business Mailing Address 465 N.W. 15TH STREET POMPANO BEACH FL 33060 465 N.W. 15TH STREET POMPANO BEACH FL 33060 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc 1st MOORE CR2E037 (10/06) City & State City & State Applied For 4. FEI Number 65-0990212 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent QUANN, ROSANNA E 2910 N.W. 24TH AVENUE OAKLAND PARK FL 33311-1408 8. The above named envity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of rog SIGNATURE (NOTE, Registered Agent signature required FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be П Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ни Delete TIDE ☐ Change Addition NAME QUANN, ROSANNA E NAME STREET ADDRESS 2910 N.W. 24TH AVENUE STREET ADDRESS CHY-SI-ZIP OAKLAND PARK FL 33311 CHY-ST-ZIP IIII Delete **K** Change Addition NAME MC CULLOUGH, MATTYE NAME STREET ADDRESS 1691 N.W. 2ND TERRACE STREET ADDRESS POMPANO BEACH FL 33060 CITY-ST-ZIP CITY-ST-ZIP Delete HILL D TITLE Addition NAME AUSTIN, JOHN NAME STREET ADDRESS STREET ADDRESS 337 N.W. 19TH COURT CBY-ST-ZIP CITY-ST-ZIP POMPANO BEACH FL 33060 HILF ☐ Delete ☐ Change ☐ Addition D NAME NAME SANFORD, PATTY STREET ADORESS STREET ADDRESS 337 N.W 19TH COURT CHY-SI-ZIP CITY-ST-ZIP POMPANO BEACH FL 33060 Senior Warden THE Delete IIIU. ☐ Addition NAME MC DOUGAL, CAROLYN NAME STREET ADDRESS STREET ADDRESS 632 N.W. 21ST COURT CITY-ST-7IP POMPANO BEACH FL 33060 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHY-SI-7IP CITY-ST-ZIP

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

FILED