

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 09, 2005 8:00 am
Secretary of State

09-09-2005 90030 011 ****61.25

DOCUMENT # N00000001871

1. Entity Name

**ST. GEORGE EPISCOPAL CHURCH CHARITABLE
FOUNDATION, INC.**



Principal Place of Business

**10560 FORT GEORGE RD.
FORT GEORGE ISLAND FL 32226**

Mailing Address

**10560 FORT GEORGE RD.
FORT GEORGE ISLAND FL 32226**

2. Principal Place of Business

895 Palm Valley Road

3. Mailing Address

400 San Juan Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ponte Vedra Beach, FL

City & State

Ponte Vedra Beach, FL

4. FEI Number

59-3207295

Applied For

Not Applicable

Zip

32082

Country

St. John's

Zip

32082

Country

St. John's

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DALY, RAYMOND III
160 SEA ISLAND DR
PONTE VEDRA BEACH FL 32082**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	BRYAN, JOAN REV	<input type="checkbox"/> Delete
NAME	400 SAN JUAN ROAD	
STREET ADDRESS	PONTE VEDRA FL 32082	
CITY-ST-ZIP	PT	

TITLE	DALY, III, DR. RAYMOND E REV.	<input type="checkbox"/> Delete
NAME	160 SEA ISLAND DRIVE	
STREET ADDRESS	PONTE VEDRA BEACH FL 32082	
CITY-ST-ZIP	ST	

TITLE	YOUNG, KAMMY B REV.	<input type="checkbox"/> Delete
NAME	10560 FORT GEORGE RD.	
STREET ADDRESS	FORT GEORGE ISLAND FL 32226	
CITY-ST-ZIP	T	

TITLE	CHALFANT, EDWARD C REV	<input type="checkbox"/> Delete
NAME	337 QUAIL POINTE	
STREET ADDRESS	PONTE VEDRA FL 32082	
CITY-ST-ZIP	TT	

TITLE	WESTBURY, RICK REV	<input type="checkbox"/> Delete
NAME	400 SAN JUAN ROAD	
STREET ADDRESS	PONTE VEDRA FL 32082	
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 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 or 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: *Joan Bryan* Rev. Joan Bryan 8-31-05 (904) 285-7390 x229