

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 01, 2008
Secretary of State**

DOCUMENT# N01168

Entity Name: ST. GABRIEL'S EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

414 PINE STREET
P. O. BOX 6584 (32782)
TITUSVILLE, FL 32796

New Principal Place of Business:

Current Mailing Address:

414 PINE STREET
P. O. BOX 6584 (32782)
TITUSVILLE, FL 32796

New Mailing Address:

FEI Number: 59-1288365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POBJECKY, REV. J. RICHARD
3060 LAS PALMAS
TITUSVILLE, FL 32780 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DSW () Delete
Name: TAYLOR, EVELYN R
Address: 2221 COUNTRY CLUB DR
City-St-Zip: TITUSVILLE, FL 32780

Title: T () Delete
Name: MCDONALD, OLIVE
Address: 3615 MIRIAM DRIVE
City-St-Zip: TITUSVILLE, FL 32796

Title: C () Delete
Name: POBJECKY, J. RICHARD,
Address: 3060 LAS PALMAS
City-St-Zip: TITUSVILLE, FL

Title: D () Delete
Name: WORSINGER, FREDERICK
Address: 7507 WINDOVER WAY
City-St-Zip: TITUSVILLE, FL 32780

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. RICHARD POBJECKY

Electronic Signature of Signing Officer or Director

REV.

02/01/2008

_____ Date