## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000012311

FILED Mar 23, 2009 Secretary of State

Entity Name: CORPUS CHRISTI EPISCOPAL CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** OKAHUMPKA, FL **Current Mailing Address: New Mailing Address:** P.O. BOX 68 OKAHUMPKA, FL 34762 FEI Number: 26-1820071 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MILLETT, STEPHEN E 3430 CR 470 OKAHUMPKA, FL 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: ( ) Delete () Change () Addition HOWE, JOHN W Name: Name: 3430 CR 470 Address: Address: City-St-Zip: OKAHUMPKA, FL City-St-Zip: Title: Title: (X) Change ( ) Addition ( ) Delete BRENHEMAN, DANIEL Name: Name: MILLETT, STEPHEN E Address: 11404 VALLEY VIEW RD. Address: 25701 LAUREL VALLEY ROAD City-St-Zip: HOWEY IN THE HILLS, FL 34737 City-St-Zip: LEESBURG, FL 34748 Title: Title: () Change () Addition ( ) Delete CRUZ, JOANN Name: Name: Address: 5647 KING JAMES AVE Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip: Title: () Delete Title: () Change () Addition Name: UNGER, RICK Name: 47339 INVORNESS DR. Address: Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip: Title: () Delete Title: () Change () Addition PEARSON, HARRY Name: Name: 25537 RIVER WALK DR. Address: Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SPEIGHTS, FRANCES HEINTZELMAN, SUE Name: Name: 25103 BETTON HILL Address: 4912 CYPRESS HEAD CT. Address: LEESBURG, FL 34748 LEESBURG, FL 34748 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 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: STEPHEN E. MILLETT T 03/23/2009