2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10725

FILED May 03, 2005 Secretary of State

Entity Name: ST. DAVID'S EPISCOPAL CHURCH

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
401 S. BRO ENGLEWO	DADWAY DOD, FL 34223			
Current Mailing Address:		New Maili	New Mailing Address:	
401 S. BRC ENGLEWC	DADWAY DOD, FL 34223			
FEI Number: 59-6173767 FEI Number Applied For () FEI Nur In accordance with s. 607.193(2)(b), F.S., the corporation did not receive t Name and Address of Current Registered Agent:		eive the prior notic	mber Not Applicable () Certificate of Status Desired (X) the prior notice. Name and Address of New Registered Agent:	
LEE, ARTH 401 S. BRC	HUR R			
The above in the State	named entity submits this statement for the purpo of Florida.	ose of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Agent		Date	
OFFICERS	S AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CD () Delete LEE, ARTHUR R 401 S BROADWAY ENGLEWOOD, FL 34223	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete FRY, TERRY 10315 WILMINGTON BLVD. ENGLEWOOD, FL 34224	Title: Name: Address: City-St-Zip:	D (X) Change () Addition PETERSON, ANNETTE 302 ELDER STREET ENGLEWOOD, FL 34223	
Title: Name: Address: City-St-Zip:	D () Delete PLOCK, JOAN 58 PINEHURST PLACE ROTONDA, FL 33947	Title: Name: Address: City-St-Zip:	D (X) Change () Addition FERGUSON, WILFORD 13363 COPPER AVENUE PORT CHARLOTTE, FL 33981	
Title: Name: Address: City-St-Zip:	T () Delete DUMAS, ALEXANDER 187 SPORTSMAN ROAD ROTONDA WEST, FL 33947	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () Delete MAURER, JOHN 660 S. BROADWAY ENGLEWOOD, FL 34224	Title: Name: Address: City-St-Zip:	D (X) Change () Addition PLOCK, JOAN 58 PINEHURST PLACE ROTONDA WEST, FL 33947	
Title: Name: Address: City-St-Zip:	S () Delete BROWN, PHYLLIS PO BOX 889 PLACIDA, FL 33946	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALEXANDER DUMAS T 05/03/2005