2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10725

FILED Jan 31, 2007 Secretary of State

Entity Name: ST. DAVID'S EPISCOPAL CHURCH

Current Principal Place of Business: New Principal Place of Business: 401 S. BROADWAY 401 S. BROADWAY ENGLEWOOD, FL 34223 ENGLEWOOD, FL 34223 US **Current Mailing Address: New Mailing Address:** 401 S. BROADWAY ENGLEWOOD, FL 34223 FEI Number: 59-6173767 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: LEE, ARTHUR R 401 S. BROADWAY ENGLEWOOD, FL 34223 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 LEE, ARTHUR R Name: Name: 401 S BROADWAY Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: Title: Title: () Delete () Change () Addition RANDLETT, BARBARA Name: Name: Address: 10063 FRANKLIN DRIVE Address: City-St-Zip: ENGLEWOOD, FL 34224 City-St-Zip: Title: () Delete Title: () Change () Addition FERGUSON, WILFORD Name: Name: 13363 COPPER AVENUE Address: Address: City-St-Zip: PORT CHARLOTTE, FL 33981 City-St-Zip: () Delete (X) Change () Addition Title: Title: Name: CIRKA, LISA Name: WARNER, VIRGINIA 340 ANCHOR ROW Address: Address: 23 QUAILS RUN BLVD #12 City-St-Zip: PLACIDA, FL 33946 City-St-Zip: ENGLEWOOD, FL 34223 US Title: () Delete Title: (X) Change () Addition MAURER, JOHN KALLOP, LYNN Name: Name: 660 SOUTH BROADWAY 1885 NEPTUNE DRIVE Address: Address: City-St-Zip: ENGLEWOOD, FL 34223 City-St-Zip: ENGLEWOOD, FL 34223 Title: () Delete Title: () Change () Addition BROWN, PHYLLIS Name: Name: Address: PO BOX 889 Address: PLACIDA, FL 33946 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ARTHUR R. LEE REV 01/31/2007