

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N12336 (6)

1. Corporation Name

ST. MARY THE VIRGIN ANGLICAN CHURCH, INC.

Principal Place of Business

Mailing Address

101 HOMEWOOD BLVD.
DELRAY BCH FL 33445

101 HOMEWOOD BLVD.
DELRAY BCH FL 33445

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 24 PM 3:02

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/20/1985

3a. Date of Last Report

03/31/1994

4. FEI Number

59-2460286

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FREDRICK L. BASIL
101 HOMEWOOD BLVD.
DELRAY BCH FL 33445

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

ASD
NOWLIN, JAMES JR
3860 LONE PINE RD
DELRAY BEACH FL

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

VD
PALMER, WESTON
22141 SOLEIL CIRCLE E.
BOCA RATON FL

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

S
AMBROSE, MARACIA
3110 SE 1ST STREET
BOYNTON BCH FL

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

T
SCHILLER, ROBERT G
4534 BRADY BLVD.
DELRAY BEACH FL

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

T
BASS, RICHARD B.
319 HOMEWOOD BLVD
DELRAY BCH FL

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

PD
WELLS, JAMES
3837 QUAIL RIDGE DRIVE
BOYNTON BEACH FL

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

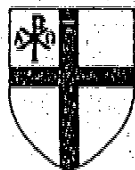
SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Title

JAMES W NOWLIN JR Sec 1/10/95



St. Mary the Virgin Anglican Church

319 HOMEWOOD BLVD., DELRAY BEACH, FLORIDA 33445

The Rev. Fredrick L. Basil

(407) 265-1960

January 18, 1995

Division of Corporations
Annual Reports Section

P.O. Box 1500

Tallahassee, FL 32302-1500

Dear Sirs or Mesdames,

Enclosed please find our duly executed and signed Corporation
Annual Report for 1995, together with our check in
the amount of \$ 61 ²⁵/₁₀₀ to cover the filing fee for the
same.

Very truly yours
James R. Wells
Treasurer