2002 UNIFORM BUSINESS REPORT (UBR)

Feb 19, 2002 8:00 am Secretary of State **DOCUMENT # N12336** 1. Entity Name 02-19-2002 90076 004 ****61.25 ST. MARY THE VIRGIN ANGLICAN CHURCH, INC. Principal Place of Business Mailing Address 101 HOMEWOOD BLVD. 101 HOMEWOOD BLVD. **DELRAY BCH FL 33445** DELRAY BCH FL 33445 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2460286 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ∝Name Street Address (P.O. Box Number is Not Acceptable) AEDRICK L. BASIL 101 HOMEWOOD BLVD. DELRAY BCH FL 33445 Zip Code City FI 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Department of State Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change ☐ Addition TITLE ASD TITLE ASD Delete NAME PARKER, ANN NAME Parker, ann STREET ADDRESS 4809 OAK CIRCLE STREET ADDRESS 908 FOX POINTE CIRCLE CITY-ST-ZIP CITY-ST-ZIP 33436 BOYNTON BEACH, FL **DELRAY BEACH FL 33445** ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME BASIL, FREDRICK L STREET ADDRESS STREET ADDRESS 101 HOMEWOOD BLVD. CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33436 ☐ Change ____ Addition_ . Delete TITLE TITLE NAME NAME MORITZ, LINDA STREET ADDRESS STREET ADDRESS 6425 MONTERAY PINE LN CITY-ST-ZIP CITY-ST-ZIP LANTANA FL 33462 Addition ☐ Change Delete TITLE TITLE TD NAME NAME LANGLEY. STREET ADDRESS STREET ADDRESS 2964 NEEDHAM CT CITY-ST-ZIP CITY-ST-ZIP DELRAY BEACH FL 33445 ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FREDRICK L. BASIL

02 561-265-1960

FILED