

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N12827

1. Entity Name

ST. MATTHEWS ANGLICAN CHURCH, INC.

Principal Place of Business

Mailing Address

10701 BLOOMINGDALE AVE  
RIVERVIEW FL 33569

P.O. BOX 1173  
RIVERVIEW FL 33568-1173

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2621459

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

PERKINS, WILLIAM H REV  
11307 YEAGER CT  
RIVERVIEW FL 33569

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

*Rev. William H. Perkins Jr. Pres / Rector*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

*1-21-2002*

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
CONNELLY, DANIEL N  
3810 BUCK TAIL LANE  
LUTHIA FL 33547 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
PERKINS, WILLIAM H REV  
11307 YEAGER CT  
RIVERVIEW FL 33569 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
KLEINOTAS, ALLEN J  
3612 GREENSTONE LANE  
VALRICO FL 33594 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
Ann Marguerite Dearnley  
823 Scenic Heights Drive  
Brandon, FL 33511 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MC KAY, THOMAS W II  
809 TUSCANY ST  
BRANDON FL 33511 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HARRIS, LAURA M  
3012 MINUTEMAN LANE  
BRANDON FL 33511 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Robert Steven Ohavesian  
2224 Laurel Oak Drive  
Valrico, FL 33594 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
PADGETT, NORMAN L  
243 HARBOR HOUSE RD  
OSPREY FL 34229 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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.

SIGNATURE:

*Rev. William H. Perkins Jr. Pres / Rector*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*1-21-2002*

Date

Daytime Phone #

*813  
663-0334*

CR2E037 (9/01)

007/915

FILED  
Feb 11, 2002 8:00 am  
Secretary of State

02-11-2002 90176 011 \*\*\*\*70.00

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DO NOT WRITE IN THIS SPACE