

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N25098

FILED
May 14, 2002 8:00 AM
Secretary of State

Entity Name: HOPE EPISCOPAL CHURCH INC.

Current Principal Place of Business:

190 INTERLACHEN RD
MELBOURNE, FL 32940 US

New Principal Place of Business:

Current Mailing Address:

190 INTERLACHEN RD
MELBOURNE, FL 32940 US

New Mailing Address:

FEI Number: 59-2846637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHILLING, WALTER B III
1803 CRANE CREEK BLVD
MELBOURNE, FL 32940

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: MARSHALL, JAMES
Address: 609 BROOKWOOD PLACE
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: PHALEN, TIM
Address: 895 KINGS POST RD
City-St-Zip: ROCKLEDGE, FL 32955

Title: DS () Delete
Name: KISS, JIM
Address: 4295 WOODHAVEN DR
City-St-Zip: MELBOURNE, FL 32935

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: EMERSON, MICHAEL E
Address: 3727 DRIFTWOOD DR
City-St-Zip: MELBOURNE, FL 32935

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: MICHAEL E EMERSON

T

05/14/2002

Electronic Signature of Signing Officer or Director

Date