

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25292

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: ST. DUNSTAN'S EPISCOPAL CHURCH, INC.

**Current Principal Place of Business:**

10888 126TH AVENUE NORTH  
LARGO, FL 33778

**New Principal Place of Business:**

**Current Mailing Address:**

10888 126TH AVENUE NORTH  
LARGO, FL 33778

**New Mailing Address:**

FEI Number: 59-1031177      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SELLERS, A E  
11177 BELLA LOMA DR  
LARGO, FL 33774      US

**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: PD ( ) Delete  
Name: SELLERS, A E  
Address: 11177 BELLA LOMA DR  
City-St-Zip: LARGO, FL

Title: VD ( ) Delete  
Name: RYAN, OKEY  
Address: 9226 133 LANE N  
City-St-Zip: LARGO, FL 33776

Title: VD ( ) Delete  
Name: RADES, MARY LEE  
Address: 310 WEST BAY DR  
City-St-Zip: LARGO, FL 33770

Title: VD ( ) Delete  
Name: PERMAR, BRAD  
Address: 12205 106 ST NORTH  
City-St-Zip: LARGO, FL 33773

Title: VD ( ) Delete  
Name: KNAPP, LAURA  
Address: 13020 115 ST N  
City-St-Zip: SEMINOLE, FL 33778

Title: VD ( ) Delete  
Name: CRISP, LARRY  
Address: 10265 ULMERTON RD #207  
City-St-Zip: LARGO, FL 33771

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SELLERS, ALBERT E FR.  
Address: 11177 BELLA LOMA DR  
City-St-Zip: LARGO, FL 33774

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

Title: VD (X) Change ( ) Addition  
Name: KNAPP, LAURA MRS.  
Address: 13020 115 ST N  
City-St-Zip: LARGO, FL 33778

Title: VD (X) Change ( ) Addition  
Name: FORBES, RAY MR  
Address: 6949 300 AVE  
City-St-Zip: CLEARWATER, FL 33761

Title: VD (X) Change ( ) Addition  
Name: SHAW, MOIRA MRS.  
Address: 11753 88 TERRACE N  
City-St-Zip: SEMINOLE, FL 33772

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

I hereby certify that the information supplied with this filing does not qualify 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: A. EDWARD SELLERS

PD

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date