

FILED
Jul 16, 2002 8:00 am
Secretary of State

05-19-2002 90164 031 ****70.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N29321

1. Entity Name

ST. KEVIN'S EPISCOPAL CHURCH

Principal Place of Business

3280 NW 135TH STREET
P.O. BOX 540678, C/O CYRIL WHITE
OPA LOCKA FL 33054-1812
US

Mailing Address

PO BOX 540678
P.O. BOX 540678, C/O CYRIL WHITE
OPA LOCKA FL 33054-1812
US

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

23-7278393

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHITE, CYRIL E REV
3280 NW 135TH ST
P O BOX 540678
OPA LOCKA FL 33054

7. Name and Address of New Registered Agent

Name MACK, FOSTER
Street Address (P.O. Box Number is Not Acceptable).
1360 NW 133 STREET

City MIAMI

FL

Zip Code
33168

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

FOSTER MACK

[Signature]

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

(NOTE: Registered agent signature required when registering)

4/21/02

DATE

FILE NOW: FEE IS \$81.25

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

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Delete
P	MACK, FOSTER	1360 NW133 STREET	MIAMI FL 33168	☐
V	WILLIAM, SHIRLEY	820 NW 200 TERRACE	MIAMI FL 33169	☐
T	ARUGU, ENANTO	1110 NW 201ST ST	MIAMI FL 33169	☐
S	CARTY, KATIE	1251 SW 86 AVENUE	PEMBROKE PINES FL 33025	☒
D	BRYAN, SYLVIA	19543 NW 58 COURT	HALEAH FL 33015	☒
D	SINGAL, MARTHA	3078 NW 95TH TERR	MIAMI FL	☐

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	☐ Change	☐ Addition
				☐	☐
				☐	☐
				☐	☐
S	HENRY, EUGENIE	3411 NW 172 Terrace	MIAMI, FL 33056	☐	☒
D	BARZET, WILLIAM	2970 NW 175 Street	MIAMI, FL 33056	☐	☒

CR2E037 (9/01)

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/02

DATE

(305) 681-6304

Daytime Phone