

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90080 004 \*\*\*\*61.25

DOCUMENT # N30652

1. Corporation Name

ST. MARY'S EPISCOPAL CHURCH OF DAYTONA BEACH, IN  
C.

Principal Place of Business

216 ORANGE AVE.  
DAYTONA BEACH FL 32114

Mailing Address

216 ORANGE AVE.  
DAYTONA BEACH FL 32114



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

02/13/1989

4. FEI Number

59-0714832

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

DUNN, FRAN RIZZO  
935 WILLOW RUN  
ORMOND BEACH FL 32174

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME MACDONALD, ROBERT S  
STREET ADDRESS 2264 LAS FUENTES DR  
CITY-ST-ZIP S DAYTONA FL

TITLE D ☒ DELETE  
NAME BLOOM, SANDY  
STREET ADDRESS 923 VALENCIA RD  
CITY-ST-ZIP S DAYTONA FL

TITLE D ☐ DELETE  
NAME CORLISS, PETER  
STREET ADDRESS 1216 MANDRAKE ROAD  
CITY-ST-ZIP DAYTONA BEACH FL

TITLE D ☒ DELETE  
NAME RULE, ALAN R.  
STREET ADDRESS 216 ORANGE AVE.  
CITY-ST-ZIP DAYTONA BEACH FL

TITLE D ☐ DELETE  
NAME FENNER, PAT  
STREET ADDRESS 105 MEADOWBROOK CIR  
CITY-ST-ZIP DAYTONA BCH FL 32114

TITLE D ☐ DELETE  
NAME RICHEY, JIM  
STREET ADDRESS 108 KINGS PT CT  
CITY-ST-ZIP DAYTONA BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME Bielick, Kay  
2.3 STREET ADDRESS 3 Oceans West Blvd. #5D4  
2.4 CITY-ST-ZIP Daytona Beach, FL 32118

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition  
4.2 NAME Cunningham, John  
4.3 STREET ADDRESS 3 Walden Lane  
4.4 CITY-ST-ZIP Ormond Beach, FL 32174

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/99

(904) 255-3669

CR2E037 (11/98)