FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -3 PM 1:42

DOCUMENT # N49006 (2)

1. Corporation Name
ST. STEPHEN'S ANGLICAN CHURCH IN AMERICA, INC.

Principal Place of Business	Mailing Address
5133 LAHANIA DRIVE SARASOTA FL 34232	5133 LAHANIA DRIVE SARASOTA FL 34232

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/21/1992
3a. Date of Last Report: 03/24/1994
4. FEI Number: 65-0031969 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business	2a. Mailing Address
21 2047 Reynolds Street	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Sarasota, Fl	28 City & State
24 Zip 34231 / 25 Country Sarasota	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

CARTER, CLARENCE W., JR
5133 LAHANIA DRIVE
SARASOTA FL 34232

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	WT	1.1 TITLE		☐ Change ☐ Addition
NAME	GILLET, NAIRN B.	1.2 NAME		
STREET ADDRESS	5046 BARRINGTON CIR	1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP		
TITLE	S	2.1 TITLE		☐ Change ☐ Addition
NAME	STAIK, MARY M	2.2 NAME		
STREET ADDRESS	2992 BAY ST	2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP		
TITLE	D	3.1 TITLE	D	☒ Change ☐ Addition
NAME	MORGAN, JOHN J	3.2 NAME	Morgan, Jack	
STREET ADDRESS	% 3524 EAST FOREST LAKE DRIVE	3.3 STREET ADDRESS	3946 Bellwood Dr.	
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	Sarasota, Fl	
TITLE	D	4.1 TITLE	D	☒ Change ☐ Addition
NAME	LEVINE, CATHERINE	4.2 NAME	Pietrano, Dorothy	
STREET ADDRESS	118 WOODINGHAMDR	4.3 STREET ADDRESS	652 Woodlawn Dr.	
CITY-ST-ZIP	VENICE FL	4.4 CITY-ST-ZIP	Bradenton, Fl	
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	DUNN, RAYMOND G	5.2 NAME		
STREET ADDRESS	5005 ELFRIDA AVE	5.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: Rev. Clarence W. Carter Jr. 1/30/95 813-371-5169
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Rev. Clarence W Carter Jr.

0003421