NONPROFIT CORPORATION _ ANNUAL REPORT

DOCUMENT # **N49006**

1999

1. Corporation Name



ST. STEPHEN'S ANGLICAN CHURCH IN AMERICA, INC.

DIVISION OF CORPORATIONS

FILED Feb 26, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

02-26-1999 90057 034 ****61.25

3. Date Incorporated or Qualifed

Principal Place of Business 2047 REYNOLOS STREET SARASOTA EL 34231 US	Mailing Address 5133 LAHAINA DRIVE SARASOTA FL 34232 US	

2. Principal P	ace of Business	2a. Mailing Address		3. Date Incorporated or Qualifed		
21 4820	S. Melatos4 Re	26 3219 24	PEWY	05/21/1992		
Suite, Apt.	#. etc.	Suite, Apt. #, etc.		4. FEI Number	Apr	lied For
22	,	27		65-0031969	Not	Applicable
City & State	e	City & State		5. Certificate of Status Desired	\$8.75 A	-
23 SAVI	ecora FL	28 SALAS-TH	FC	J. Certificate of Status Desires	Fee Red	uired
Zip	Country	Zip	Country	6. Election Campaign Financing	\$5.00 t	May Be
24 342	33 ₂₅ US	29 34235 31	0 US	Trust Fund Contribution	Added to	Fees
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Regist	ered Agent	
	j		81 Name	NAIRN' B. GILLET		l
THE REV. CLARENCE W. CARTER JR.			82 Street	Address (P.O. Box Number is Not Acceptable)		
	ANIA DRIVE			219 ZYTH PRWY		
	A FL 34232		83			İ
0,40,000	5 0 1202		84 City		85 Zip C	ode
	* ^			SAFASOTA	FL 342	<u>'</u> لَدُ. ﴿
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statutes	, the above-named	corporation submits this statement for the purporation's board of directors. I hereby accept the	se of changing its r	registered
office or r	egistered agent, or both, in the State m familiar with and accept the obliga	of Florida. Such change was auti tions of, Section 617.0503, Florid	nonzed by the corpo a Statutes. 🖊	oration's board or directors. Thereby accept the	appointment as reg	Biciou
t	War 1.10	" NAIRN'B. GILLE	T AFT	1/2	3/55	l
SIGNATURE	Signature typed or printed name of registered ages		egistered Agent signature re		TE	
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER		
TITLE	WT	☐ DELETE	1.1 TITLE	PT	Change	Addition
NAME	GILLET, NAIRN B.		1.2 NAME	,		
STREET ADDRESS	3219 24TH PKWY		1.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34235		1.4 CITY-ST-ZIP			
TITLE	S	☐ DELETE	2.1 TITLE		Change	☐ Addition
NAME	GILLET, ROSE		2.2 NAME			·
STREET ADDRESS	3219 24RH PKWY		2.3 STREET ADDRESS	•		
CITY-ST-ZIP	SARASOTA FL 34235	_	2.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME	STANYER, FRED		3.2 NAME		•	
STREET ADDRESS	1648 STARLING DR		3.3 STREET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34231		3.4. CITY-ST-ZIP			
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME	PIETRANO, DOROTHY		4.2 NAME			
STREET ADDRESS	652 WOODLAWN DR		4.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL		4.4 CITY-ST-ZIP			
TITLE	D	™ DELETE	5.1 TITLE	D	☐ Change	Addition
NAME	GOFFRED, WILLIAM	•	5.2 NAME	B'CONNOR, NORA		
STREET ADDRESS	3631 HUNTINGTON PL DRIVE		5.3 STREET ADDRESS	SOJE BARRINGTON COL		
CITY-ST-ZIP	SARASOTA FL		5.4 CITY-ST-ZIP	SARASITA PL 34234		
TITLE	D	₩ DELETE	6.1 TITLE	D	☐ Change	Addition
NAME	REDDEN, CLIFFORD G	,	6.2 NAME	BEACHY, KEVIM		
STREET ADDRESS	5206 SATTLER PL		6.3 STREET ADDRESS	5512 35T# CT. 6.		
	OLD COTT TO CLOCK		SACTIVET 7ID	APANIL 704, FR. 34207		

<u> | Sarasota Fl 34232</u> 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 arrestachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #