2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2000 8:00 am
Secretary of State
03-06-2000 90120 047 ****61.25

DOCUMENT # N49006

1. Entity Name

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

Principal Place of Business	Mailing Address
4826 S MELATOSA RD SARASOTA FL 34233 US	3219 24TH PKWY SARASOTA FL 34235-8803 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3650 17TH ST	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SARASOTA FL	City & State
Zip: 34235 Country: USA	Zip Country

4. FEI Number 65-0031969 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GILLET, NAIRN B 3219 24TH PKWYT SARASOTA FL 34235	Name *Street Address (P.O. Box Number is Not Acceptable)* City **FL** Zip Code

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

FILE NOW: FEE IS $61.25	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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT GILLET, NAIRN B. 3219 24TH PKWY SARASOTA FL 34235	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GILLET, ROSE 3219 24RH PKWY SARASOTA FL 34235	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STANYER, FRED 1648 STARLING DR SARASOTA FL 34231	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PIETRANO, DOROTHY 652 WOODLAWN DR BRADENTON FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D O'CONNOR, NORA 5056 BARRINGTON CT SARASOTA FL 34234	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~BEACHY~~, KEVIN 5512 35TH CT E BRADENTON FL 34203	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BEACHY, KEVIN	☐ Change ☐ Addition

CR2E037 (9/99)

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 REQUIRED~~ 3/3/00 941-366-9584
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #