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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Suzanna B. Mortonham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

9:11 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N49299** (3)

1. Corporation Name
ST. MATTHEW THE APOSTLE EPISCOPAL CHURCH, INC.

Principal Place of Business Mailing Address
7410 SUNSET DRIVE MIAMI FL 33143 **7410 SUNSET DRIVE MIAMI FL 33143**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 06/09/1992	3a. Date of Last Report 08/31/1994
4. FEI Number 59-1463601	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under s. 199, F.S., Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26 7410 Sunset Dr
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Miami, FL
Zip 24	Country 30 USA
Country 25	Zip 29 33143

9. Name and Address of Current Registered Agent REID, RAYMOND W., JR. 7410 SUNSET DRIVE MIAMI FL 33143	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
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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 _____ (Signature typed or printed name of registered agent and the filer) (Name Registered Agent Signature required when necessary) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY ST ZIP	D REID, RAYMOND W JR. 9011 SW 68 TERR. MIAMI FL 33173	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D MACCHIARELLA, TED 8333 SW 144 CT. MIAMI FL 33183	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY ST ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Jim McGhee Sr. 7750 SW 144 ST Miami, FL 33158
TITLE NAME STREET ADDRESS CITY ST ZIP	T PERAR, WILLIAM J 11502 SW 129TH PL. MIAMI FL 33186	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY ST ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Howard Booth 15400 Palmetto Lakes Dr. Miami, FL 33157
TITLE NAME STREET ADDRESS CITY ST ZIP	D YOUNG, EMLIE 9013 SW 62 TERR. MIAMI FL 33173	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY ST ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Chuck Breit 6780 SW 19 St Miami, FL 33155
TITLE NAME STREET ADDRESS CITY ST ZIP	D HUSTON, MARY 1001 MANATI AVE. CORAL GABLES FL 33146	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	D WOOD, WILLIAM 1540 MERCADO AVE. CORAL GABLES FL 33146	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY ST ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Valerie Davis-Bailey 7977 SW 105 Place Miami, FL 33173

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)(b), 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: *[Signature]* **REV. RAYMOND W. REID JR.** (305) 665-7333 APRIL 27, 1995

N49299

ADDITIONAL OFFICERS AND DIRECTORS

Bonnie Monticino
10145 Sw 60 St
Miami, FL 33173

Roger Persons
9755 Sw 76 St
Miami, FL 33173

Gilbert Morrell
19110 SW 96 Ave
Miami, FL 33157

David Butcher
14553 SW 144 Terr
Miami, FL 33186