

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N49299 (3)**  
1. Corporation Name  
**ST. MATTHEW THE APOSTLE EPISCOPAL CHURCH, INC.**



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

3. Date Incorporated or Qualified: **06/09/1992**  
3a. Date of Last Report: **05/01/1995**  
4. FEI Number: **59-1463601**  
5. Certificate of Status Desired:  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution:  **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

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

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**

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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE: <b>D</b> <input type="checkbox"/> DELETE	NAME: <b>REID, RAYMOND W JR.</b>
STREET ADDRESS: <b>9011 SW 68 TERR.</b>	CITY - ST - ZIP: <b>MIAMI FL 33173</b>
TITLE: <b>D</b> <input type="checkbox"/> DELETE	NAME: <b>MCGHEE, JIM S</b>
STREET ADDRESS: <b>7750 S W 144TH ST</b>	CITY - ST - ZIP: <b>MIAMI FL</b>
TITLE: <b>T</b> <input type="checkbox"/> DELETE	NAME: <b>BOOTH, HOWARD</b>
STREET ADDRESS: <b>15400 PALMETTO LAKES DR</b>	CITY - ST - ZIP: <b>MIAMI FL</b>
TITLE: <b>D</b> <input type="checkbox"/> DELETE	NAME: <b>BRIET, CHUCK</b>
STREET ADDRESS: <b>6780 S W 19TH ST</b>	CITY - ST - ZIP: <b>MIAMI FL</b>
TITLE: <b>D</b> <input type="checkbox"/> DELETE	NAME: <b>HUSTON, MARY</b>
STREET ADDRESS: <b>1001 MANATI AVE.</b>	CITY - ST - ZIP: <b>CORAL GABLES FL 33146</b>
TITLE: <b>D</b> <input type="checkbox"/> DELETE	NAME: <b>DAVIS-BAILEY, VALERIE</b>
STREET ADDRESS: <b>7977 S W 105TH PLACE</b>	CITY - ST - ZIP: <b>MIAMI FL</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	1.2 NAME:
1.3 STREET ADDRESS:	1.4 CITY - ST - ZIP:
2.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	2.2 NAME:
2.3 STREET ADDRESS:	2.4 CITY - ST - ZIP:
3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	3.2 NAME:
3.3 STREET ADDRESS:	3.4 CITY - ST - ZIP:
4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	4.2 NAME:
4.3 STREET ADDRESS:	4.4 CITY - ST - ZIP:
5.1 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	5.2 NAME: <b>Huston, Tom</b>
5.3 STREET ADDRESS:	5.4 CITY - ST - ZIP: <b>1001 Manati Ave Coral Gables, FL 33146</b>
6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	6.2 NAME:
6.3 STREET ADDRESS:	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)(k), 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. Raymond W. Reid** (305) 665-7333  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

January 31, 1996

CR2E037 (12/95)

ADDITIONAL OFFICERS AND DIRECTORS

Roger Persons  
9755 SW 76 St  
Miami, FL 33173

Gilbert Morrell  
19110 SW 96 Ave  
Miami, FL 33157

Lee Bennet  
426 Santander #11  
Coral Gables, FL 33134

Ken Shaffer  
13361 SW 47 St  
Miami, FL 33175