

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2000 8:00 am
Secretary of State

03-13-2000 90034 013 ****61.25

DOCUMENT # N49299

1. Entity Name

ST. MATTHEW THE APOSTLE EPISCOPAL CHURCH, INC.

Principal Place of Business

Mailing Address

**7410 SUNSET DRIVE
 MIAMI FL 33143**

**7410 SUNSET DR
 MIAMI FL 33143-4130
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1463601

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

**REID, RAYMOND W., JR.
 7410 SUNSET DRIVE
 MIAMI FL 33143**

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	D	<input type="checkbox"/> Delete
NAME	REID, RAYMOND W JR.	
STREET ADDRESS	9011 SW 68 TERR.	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MCGHEE, JIM S	
STREET ADDRESS	7750 S W 144TH ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	D / S	<input type="checkbox"/> Delete
NAME	ALLAN, RICHARD	
STREET ADDRESS	9255 SW 72 AVE.	
CITY-ST-ZIP	MIAMI FL 33156	
TITLE	D	<input type="checkbox"/> Delete
NAME	CARTER, ROBERT	
STREET ADDRESS	1724 SW 100 AVE.	
CITY-ST-ZIP	MIAMI FL 33165	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-00 305-665-7333

Date

Daytime Phone #

CR2E037 (9/99)



DO NOT WRITE IN THIS SPACE

N49299

624438

ADDITIONAL OFFICERS AND DIRECTORS
YEAR 2000

NAME

ADDRESS

Copeland, Eric
D

737 Camilo Avenue
Coral Gables, FL 33134

Valerie Davis-Bailey
D

1865 Brickell Ave, #A1605
Miami, FL 33129

Gispert, Jose
D

7501 SW 138 Court
Miami, FL 33183

Huston, Mary
D

1001 Manati Avenue
Coral Gables, FL 33146

Macchiarella, Ted
D

8333 SW 144 Court
Miami, FL 33183

Mary Manning
D

6061 SW 110 Avenue
Miami, FL 33173

Ray Shanklin
D

9821 SW 132 Terrace
Miami, FL 33176