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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N92000000785

1. Corporation Name

ALL SOULS EPISCOPAL CHURCH OF MIAMI BEACH, INC.

4 1 7 6 8
 417608 - 90173 - 39

Principal Place of Business

4025 PINE TREE DR.
 MIAMI BEACH FL 33140

Mailing Address

4025 PINE TREE DR.
 MIAMI BEACH FL 33140



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified
 12/11/1992

4. FEI Number
 59-0624350

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

THE REV. L. HOWARD MALTHY
 4027 PINE TREE DR.
 #201
 MIAMI BEACH FL 33140

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE TD DELETE
 NAME DOBSON, DENALTA
 STREET ADDRESS 4001 SW 5 TERR
 CITY-ST-ZIP MIAMI FL

TITLE VD DELETE
 NAME FRENCH, EUGENE W JR.
 STREET ADDRESS 1485 NE 121 ST. #D-413
 CITY-ST-ZIP N. MIAMI FL 33161

TITLE D DELETE
 NAME LAYFIELD, KATHY
 STREET ADDRESS 4411 PINE TREE DR.
 CITY-ST-ZIP MIAMI BEACH FL 33130

TITLE PD DELETE
 NAME MALTBY, THE R L.
 STREET ADDRESS 4027 PINE TREE DR
 CITY-ST-ZIP MIAMI BEACH FL

TITLE SD DELETE
 NAME LOPEZ, GEORGINA
 STREET ADDRESS 3114 ALTON RD.
 CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
 2.2 NAME SD Richards, Louis M.
 2.3 STREET ADDRESS 3601 SW 62 WAY
 2.4 CITY-ST-ZIP Miramar, FL 33140

3.1 TITLE Change Addition
 3.2 NAME VD
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME Maltby, Rev. L. Howard
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME VD Bianchi, Georgina
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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 an attachment with an address, with all other like empowered.

SIGNATURE: *L. Howard Maltby* REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: 4/21/99
 Daytime Phone #: 305 538 2244

CR2E037 (11/98)