

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 27 AM 11:05

DOCUMENT # **N92000000928 (3)**

1. Corporation Name

THE EPISCOPAL CHURCH OF THE GOOD SHEPHERD OF VENICE, FLORIDA, INC.

Principal Place of Business

Mailing Address

242 WOODINGHAM TRAIL
VENICE FL 34292-3934
1115 Center Rd
Venice FL 34292

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VENICE FL 34292-3934
1115 Center Rd
Venice FL 34292

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 12/23/1992	3a. Date of Last Report 03/08/1994
4. FEI Number 65-0377487	Applied For Not Applicable

2. Principal Place of Business 21 1115 Center Rd Suite, Apt #, etc	2a. Mailing Address 26 1115 Center Rd Suite, Apt #, etc	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
22 City & State Venice FL	27 City & State Venice FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
23 Zip 34292	24 Country USA	28 Zip 34292
25 Country USA	29 Zip 34292	30 Country USA

9. Name and Address of Current Registered Agent KLEIN, DAVID F 242 WOODINGHAM TRAIL VENICE FL 34292	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 _____ (NOTE: Registered Agent signature required when reappointing) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D KLEIN, DAVID F REV 242 WOODINGHAM TRAIL VENICE FL 34292	11 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D FOSTER, ALICE 607 PADUA COURT NOKOMIS FL 34291
NAME	D EVELAND GILL 1160 TARPONE CENTER DR., #600 VENICE FL 34285	12 NAME	D ROBERT NICHOLSON 1904 PEBBLE BEACH COURT VENICE FL 34293
STREET ADDRESS	D FOSTER, JOHN 607 PADUA CT NOKOMIS FL 34275	13 STREET ADDRESS	D LEWIS, ROBERT 1209 GOLD COAST BLVD VENICE FL 34292
CITY - ST - ZIP	D BERGMANN, LILLIAN 1045 LEMON BAY DR. VENICE FL	14 CITY - ST - ZIP	D LUESER, GIL 275 BURKE RD VENICE FL 34293
TITLE	D GAYGAN, WILLIAM 210 SOUTHAMPTON LN VENICE FL 34293	15 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D CLOWNEY, WILLIAM 6691 MARIUS RD. NORTH PORT FL	16 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		17 STREET ADDRESS	
CITY - ST - ZIP		18 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 110.07(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: William C. Gaygan, Treasurer & Director William C. GAYGAN 3/21/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Signature Block #)
(313) 493-1990