2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000214

FILED Mar 22, 2005 Secretary of State

Entity Name: ALL SAINTS' CHURCH FOUNDATION OF WINTER PARK, INC.

Current Principal Place of Business: New Principal Place of Business: 338 E LYMAN AVENUE WINTER PARK, FL 32789 **Current Mailing Address: New Mailing Address:** 338 E LYMAN AVENUE WINTER PARK, FL 32789 FEI Number: 59-3161152 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILSON, H D 338 E LYMAN AVENUE WINTER PARK, FL 32789 US 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: CD () Delete () Change () Addition WILSON, H. D REV Name: Name: 338 E LYMAN AVE Address: Address: City-St-Zip: WINTER PARK, FL City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: HUGHES, JERRY Name: Address: 2180 DERBY SHIRE ROAD Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: () Delete Title: () Change () Addition SMALLEY, JAMES F. J Name: Name: 1261 WELLINGTON TERR Address: Address: City-St-Zip: MAITLAND, FL City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: BUKEMANN, ROBERT Name: 3960 LAKE MIRA DR Address: Address: City-St-Zip: ORLANDO, FL 32817 City-St-Zip: Title: () Delete Title: (X) Change () Addition JOHNSON, TOOD COLEMAN, JOHN Name: Name: 1210 ALBEANA DR 950 LINCOLN CIRCLE Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: WINTER PARK, FL 32789 Title: () Delete Title: (X) Change () Addition SIMMONS, STEVE CALADO, GUY Name: Name: Address: 121 W. KINGS WAY Address: 2310 FORREST ROAD WINTER PARK, FL 32789 WINTER PARK, FL 32789 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: H. DAVID WILSON RECT 03/22/2005