2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003471

Entity Name: ST. CECILIA'S EPISCOPAL CHURCH, INC.

FILED May 23, 2009 Secretary of State

1920 SOUTH MAYDELL DRIVE TAMPA, FL 33619

Current Mailing Address: New Mailing Address:

1920 SOUTH MAYDELL DRIVE TAMPA, FL 33619 US

FEI Number: 59-3198376 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TULEY, PAT 10912 CARNELIAN LN RIVERVIEW, FL 33578 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:

- Flateria Circulator d'Arrel

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD () Delete Title: STD (X) Change () Addition

 Name:
 TULEY, PAT
 Name:
 TULEY, PAT

 Address:
 10912 CARNELIAN LN
 Address:
 10912 CARNELIAN LN

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 RIVERVIEW, FL 33578

Title: D () Delete Title: () Change () Addition

 Name:
 BILL, BIRD
 Name:

 Address:
 10922 ROSS STREET
 Address:

 City-St-Zip:
 TAMPA, FL 33610
 City-St-Zip:

 Name:
 POPPE, PHYLLIS
 Name:
 POPPE, PHYLLIS

 Address:
 1959 AMBERWOOD DR
 Address:
 1959 AMBERWOOD DR

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 RIVERVIEW, FL 33578

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MURRAY, VIVIAN
 Name:
 JACOBS. JR, AL

 Address:
 8001 WICNITA WAY
 Address:
 2416 PANKAW LN

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:
 VALRICO, FL 33594

Name: BUTLER, BERNICE Name: VAN NESS, GERI

 Address:
 2054 BALFOUR CIR
 Address:
 12500 MCMULLEN LOOP, #371

 City-St-Zip:
 TAMPA, FL 33619
 City-St-Zip:
 RIVERVIEW, FL 33578

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PAT TULEY STD 05/23/2009