

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # N94000000699 (8)

1. Corporation Name

ST. PAUL'S REFORMED EPISCOPAL CHURCH, INCORPORATED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

4545 10TH AVENUE NORTH
ST. PETERSBURG FL 33713

4545 10TH AVENUE NORTH
ST. PETERSBURG FL 33713

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/07/1994

3a. Date of Last Report

4. FEI Number

59-3209325

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAURICE, FRANK II
4545 10TH AVENUE NORTH
ST. PETERSBURG FL 33713

81 Name

Newgent, Joy

82 Street Address (P.O. Box Number is Not Acceptable)

4545 10th Avenue North

83

St. Petersburg, Florida

84 City

FL

85 Zip Code

33713-6239

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 Joy Newgent

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

(NOTE: Registered Agent signature required when reappointing)

4/21/1995

DATE

12. OFFICERS AND DIRECTORS

TITLE S
NAME MAURICE, NADEAN
STREET ADDRESS 4545 10TH AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33713

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE S ☒ Change ☐ Addition
1.2 NAME Newgent, Joy
1.3 STREET ADDRESS 4545 10th Avenue North
1.4 CITY-ST-ZIP St. Petersburg, FL 33713-6239

2.1 TITLE Minister ☐ Change ☒ Addition
2.2 NAME James R. Warfel
2.3 STREET ADDRESS 4545 10th Avenue North
2.4 CITY-ST-ZIP St. Petersburg, FL 33713-6239

3.1 TITLE Business Administration ☐ Change ☒ Addition
3.2 NAME Dooley, Alfreda
3.3 STREET ADDRESS 705 South Main Street
3.4 CITY-ST-ZIP Summerville, South Carolina 29483

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
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 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 resolver 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:

Joy Newgent

Joy Newgent

4/21/1995

Date

8/3 837-3235

Telephone Number