

3-5-98 B 2849 C
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Mar 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000005176 (2)**

1. Corporation Name

ST. PAULS ANGLICAN CHURCH, INC.



Principal Place of Business 7200 N WICKHAM RD MELBOURNE FL 32940 US	Mailing Address 7200 N WICKHAM RD MELBOURNE FL 32940 US
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3. Date Incorporated or Qualified

10/19/1994

4. FEI Number

59-3276703

Applied For

Not Applicable

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. 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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KITE-POWELL, RUFUS B REV.
7200 N WICKHAM RD
MELBOURNE FL 32940**

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

The Rev. Rufus B. Kite-Powell, Pastor

2/12/98

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	☐ DELETE
NAME	PD KITE-POWELL, RUFUS B REV.
STREET ADDRESS	7200 N WICKHAM RD
CITY-ST-ZIP	MELBOURNE FL
TITLE	☐ DELETE
NAME	VPD SCHENCK, JAY G.M.
STREET ADDRESS	3815 N. INDIAN RIVER DRIVE
CITY-ST-ZIP	COCOA FL 32922
TITLE	☐ DELETE
NAME	TD COOTE, WILBUR
STREET ADDRESS	623 CASA GRANDE DR
CITY-ST-ZIP	MELBOURNE FL
TITLE	☒ DELETE
NAME	D PENNINGTON, BOB
STREET ADDRESS	1522 FRONTIER DRIVE
CITY-ST-ZIP	MELBOURNE FL 32940
TITLE	☒ DELETE
NAME	D HIGBIE, SUSAN
STREET ADDRESS	3512 SAMUEL PLACE
CITY-ST-ZIP	MELBOURNE FL 32934
TITLE	☐ DELETE
NAME	SAMUELSON
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☒ Addition
1.2 NAME	D SAN STAPLETON
1.3 STREET ADDRESS	1463 CYPRESS TRACE DR.
1.4 CITY-ST-ZIP	MELBOURNE FL 32940
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	D MARILYN KING
2.3 STREET ADDRESS	8790 S. TROPICAL TRAIL
2.4 CITY-ST-ZIP	MERRITT ISLAND FL 32953
3.1 TITLE	☐ Change ☒ Addition
3.2 NAME	D JOHN STELLNER
3.3 STREET ADDRESS	205 AUGUSTA WAY
3.4 CITY-ST-ZIP	MELBOURNE FL 32940
4.1 TITLE	☐ Change ☒ Addition
4.2 NAME	D HOWARD PECKHAM
4.3 STREET ADDRESS	1503 CHESAPEAKE CT
4.4 CITY-ST-ZIP	MELBOURNE FL 32940
5.1 TITLE	☐ Change ☒ Addition
5.2 NAME	D L. A. DAVIS
5.3 STREET ADDRESS	1147 WENDSWORTH CIRCLE
5.4 CITY-ST-ZIP	ROSELAND FL 32955
6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	D Patricia Rogers
6.3 STREET ADDRESS	340 LYNN AVENUE
6.4 CITY-ST-ZIP	SATELITE BCH, FL 32937

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.

SIGNATURE:

Wilbur Coote **2/12/98** **407-458-412**

CR2E037 (10/97)