

2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N94000005176

1. Entity Name
ST. PAULS ANGLICAN CHURCH, INC.



FILED

04 MAY 14 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
7200 N WICKHAM RD
MELBOURNE, FL 32940 US

Mailing Address
7200 N WICKHAM RD
MELBOURNE, FL 32940 US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05062004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-3276703

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name
The Rev'd Douglas King
Street Address (P.O. Box Number is Not Acceptable)
7200 N WICKHAM

City *Melbourne* FL Zip Code *32940*

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *The Rev'd Douglas King* Rector

5/6/2004
DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME KITE-POWELL, RUFUS B REV.
STREET ADDRESS 7200 N WICKHAM RD
CITY-ST-ZIP MELBOURNE, FL ☒ Delete

TITLE PD
NAME *The Rev'd Douglas King*
STREET ADDRESS *7200 N Wickham Rd*
CITY-ST-ZIP *Melbourne FL 32940* ☐ Change ☒ Addition

TITLE D
NAME BUNKER, DEBORA
STREET ADDRESS 299 SANDY RUN
CITY-ST-ZIP MELBOURNE, FL 32940 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
06/29/04--01070--001 *\$61.25 ☐ Change ☐ Addition

TITLE D
NAME SHEPARD, BILL
STREET ADDRESS 417 NTH. NEPTUNE DR.
CITY-ST-ZIP SATELLITE BEACH, FL 32937 ☒ Delete

TITLE
NAME *James Booth*
STREET ADDRESS *1995 Buckhead Court*
CITY-ST-ZIP *Viera FL 32955* ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *The Rev'd Douglas King* Rector
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/6/2004 (321)259-1130
Date Daytime Phone #