

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005176

FILED  
May 11, 2006  
Secretary of State

Entity Name: ST. PAULS ANGLICAN CHURCH, INC.

## Current Principal Place of Business:

7200 N WICKHAM RD  
MELBOURNE, FL 32940 US

## New Principal Place of Business:

## Current Mailing Address:

7200 N WICKHAM RD  
MELBOURNE, FL 32940 US

## New Mailing Address:

FEI Number: 59-3276703      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:

KING, DOUGLAS REV.  
7200 N WICKHAM RD  
MELBOURNE, FL 32940 US

## Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete  
Name: KING, DOUGLAS REV.  
Address: 7200 N WICKHAM RD  
City-St-Zip: MELBOURNE, FL

Title: D ( ) Delete  
Name: COOTE, WILBUR  
Address: 623 CASA GRANDE DR  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: BOOTH, JAMES  
Address: 1995 BUCKHEAD COURT  
City-St-Zip: VIERA, FL 32955

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: BUNKER, DEBORA  
Address: 299 SANDY RUN  
City-St-Zip: MELBOURNE, FL 32940

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: REVD DOUGLAS KING

PD

05/11/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date