

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001052

FILED  
Mar 19, 2007  
Secretary of State

Entity Name: ST. LUKE'S ANGLICAN CHURCH, INC.

**Current Principal Place of Business:**

815 TAYLOR RD.  
PORT ORANGE, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

815 TAYLOR RD.  
PORT ORANGE, FL 32127

**New Mailing Address:**

FEI Number: 59-1517598

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLASINGAME, FRANCES D  
749 NIXON LANE  
PORT ORANGE, FL 32129 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: TD ( ) Delete  
Name: BLASINGAME, FRANCES D  
Address: 749 NIXON LANE  
City-St-Zip: PORT ORANGE, FL 32129

Title: P ( ) Delete  
Name: EASTES, DAVID R REV  
Address: 963 SAND CREST DR  
City-St-Zip: PORT ORANGE, FL 32127

Title: DV ( ) Delete  
Name: HINGSON, DOROTHY  
Address: 2385 OLD SAMSULA ROAD  
City-St-Zip: PORT ORANGE, FL 32128

Title: S ( ) Delete  
Name: SYLVESTER, KATHLEEN  
Address: 6057 SABAL CREEK BLVD  
City-St-Zip: PORT ORANGE, FL 32127

Title: D ( ) Delete  
Name: SIMES, PATSY  
Address: 105 N. ST. ANDREWS DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: D ( ) Delete  
Name: ASHBAUGH, BILL  
Address: 27 COACHLIGHT COURT  
City-St-Zip: SOUTH DAYTONA, FL 321119

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: FRANCES D BLASINGAME

TD

03/19/2007

Electronic Signature of Signing Officer or Director

Date