

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000003579

1. Entity Name

THE EPISCOPAL FOUNDATION, INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90052 029 ****61.25

Principal Place of Business

Mailing Address

325 EAST MARKET ST
 JACKSONVILLE FL 32202

325 EAST MARKET ST
 JACKSONVILLE FL 32202-2732

2. Principal Place of Business

325 MARKET ST

3. Mailing Address

325 MARKET ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

JACKSONVILLE, FL

City & State

JACKSONVILLE, FL

4. FEI Number

59-3393977

Applied For

Not Applicable

Zip

32202

Country

USA

Zip

32202-2732

Country

USA

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

ISAAC, FRED C
 2468 ATLANTIC BLVD.
 JACKSONVILLE FL 32207

Name

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

City

FL

Zip Code

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.

SIGNATURE

Fred C Isaac

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: D Delete
 NAME: ERNEST, ALBERT JR.
 STREET ADDRESS: 1560 LANCASTER TERRACE STE 140
 CITY-ST-ZIP: JACKSONVILLE FL 32204

TITLE: DIRECTOR Change Addition
 NAME: HOWELL, MARSHALL
 STREET ADDRESS: 325 MARKET ST
 CITY-ST-ZIP: JACKSONVILLE, FL 32202

TITLE: D Delete
 NAME: LANGFORD, GEORGE R
 STREET ADDRESS: 837 LAKE RIDGE DRIVE
 CITY-ST-ZIP: TALLAHASSEE FL 32312

TITLE: DIRECTOR Change Addition
 NAME: COMMANDER, CHARLES E
 STREET ADDRESS: 325 MARKET ST
 CITY-ST-ZIP: JACKSONVILLE, FL 32202

TITLE: P Delete
 NAME: MCCARTY, BARNUM REV
 STREET ADDRESS: 325 MARKET ST
 CITY-ST-ZIP: JACKSONVILLE FL 32202

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

TITLE: D Delete
 NAME: CASSIDY, ARCH W
 STREET ADDRESS: 50 NO LAURA STREET
 CITY-ST-ZIP: JACKSONVILLE FL 32202

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

TITLE: D Delete
 NAME: STEIN, JOANNIE
 STREET ADDRESS: 121 WEST FORSYTH ST. STE 200
 CITY-ST-ZIP: JACKSONVILLE FL 32202

TITLE: TREASURER Change Addition
 NAME: PEEPLES, Rebecca G
 STREET ADDRESS: 325 MARKET ST
 CITY-ST-ZIP: JACKSONVILLE, FL 32202

TITLE: D Delete
 NAME: JECKO, STEPHEN H REV.
 STREET ADDRESS: 325 MARKET ST
 CITY-ST-ZIP: JACKSONVILLE FL 32202

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

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: *Rebecca G Peoples*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/04/2000 904-356-1328
 Date Daytime Phone #

CR2E037 (9/99)