## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR

## FILED DOCUMENT # N97000004245 2007 MAY - 1 AM 11: 34 ST. PHILIP'S ANGLICAN CHURCH, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 4545 10TH AVE P.O. BOX 11161 ST. PETERSBURG, FL 33733-1161 US SAINT PETERSBURG, FL 33713 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 09132006 Chg-NP CR2E037 (4/06) City & State City & State Applied For 4. FEI Number 59-3473382 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KENNETH E, CONWAY GIBSON, JAMES CUR Street Address (P.O. Box Number is Not Acceptable) 4543 15TH AVE NORTH SAINT PETERSBURG, FL 33713 6425 IST AV N City ST PETERSBURG 23710 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 4-23-07 KENNETH E, CONWAY-TREASURER some SIGNATURE sture, typed or printed name of registered agent and title if pplicable 9. Election Campaign Financing Make check payable to \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Спапде TITLE Delete TITLE ☐ Addition DIETERLEVELIZABET DIETORLE, ELIZABETH NAME NAME STREET ADDRESS 13861 TERN LN STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33762 CITY-ST-ZIP Addition VPD Delete VIEBROCK, CATHARINE C. TITLE TITLE HAAN, EDWARD NAME NAME 3531 37TH STN 111 MYSTIC LAKE TERRACE N STREET ADDRESS STREET ADDRESS ST PETERSBURG, FL 33713 CITY-ST-ZIP SAINT PETERSBURG, FL 33702 CITY-ST-ZIP Addition Delete TITLE TITLE ☐ Change CONWAY, KENNETH E. WILFONG, KAREN NAME NAME 6425 IST AV N STREET ADDRESS 782 41\$T AVENUE, NE STREET ADDRESS ST PETERSBURG, FL 33710 ST PETERSBURG, FL 33703 CITY-ST-ZIP CITY-ST-ZIP 8001030944**9**8°° **UPD** ☐ Addition TITLE Delete TITLE HOWELL, LESLIE NAME NAME 05/23/07--01009--032 \*\*61.25 STREET ADDRESS 131 BLUFFVIEW DRIVE #207 STREET ADDRESS BELLERIA BLUFFS, FL 33770 CITY-ST-7/P CITY-ST-ZIP Addition Delete TITLE TITLE ☐ Change POOLE, JOHN H. GIBSON, JAMES C JR NAME NAME 2755 DARTMOUTH AVE NO STREET ADDRESS STREET ADDRESS 33782 PINELLAS PARKIFL CITY-ST-ZIP SAINT PETERSBURG, FL 33713 CITY-ST-ZIP ☐ Change Delete TITLE Addition TITLE HEDMALL LYDHN MELANSON, ROBERT NAME NAME 4955 DARTMOUTH AV 9930 56TH ST NORTH STREET ADDRESS STREET ADDRESS PETERSBURG, FL PINELLAS PARK, FL 33782 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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

KENNETH E CONWAY

5/10al)

4-23-07 727-347-0442

Daytime Phone #