2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2004 8:00 am
Secretary of State
02-13-2004 90007 014 ****61.25

DOCUMENT # N98000001037

1. Entity Name
SOUTHEAST FLORIDA EPISCOPAL FOUNDATION, INC.

Principal Place of Business	Mailing Address
525 NE 15 STREET MIAMI, FL 33132 US	525 NE 15 STREET MIAMI, FL 33132 US

02042004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
8895 N. MILITARY TRAIL	8895 N. MILITARY TRAIL
Suite, Apt. #, etc. SUITE 205-C	Suite, Apt. #, etc. SUITE 205-C
City & State PALM BEACH GARDENS FL	City & State PALM BEACH GARDENS FL
Zip / Country 33410 / US	Zip / Country 33410 / US

4. FEI Number 65-0934414 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION
C/O AKERMAN SENTERFITT
ONE SOUTHEAST THIRD AVE 28TH FLR
MIAMI, FL 33131

7. Name and Address of New Registered Agent

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

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	CD GRONUND, BOB 525 N E 15 STREET MIAMI, FL 33132	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD COOKSON, TOM 8895 N MILITARY TRAIL PALM BEACH GARDENS, FL 33410	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD COOKSON, TOM 525 N E 15TH STREET MIAMI, FL 33132	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD WEAVER BONNIE 8895 N. MILITARY TRAIL PALM BEACH GARDENS, FL 33410	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HAMNER, MURRAY 525 N E 15TH STREET MIAMI, FL 33132	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HAMNER, MURRAY 8895 N. MILITARY TRAIL PALM BEACH GARDENS, FL 33410	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RING, CHARLES B 525 NE 15 STREET MIAMI, FL 33132	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RING, CHARLES B. 8895 N. MILITARY TRAIL PALM BEACH GARDENS	☒ 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: Charles B Ring, President 2-9-04 561-795-6424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #