

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001037

FILED
Feb 02, 2011
Secretary of State

Entity Name: EPISCOPAL CHARITIES OF SOUTHEAST FLORIDA, INC.

Current Principal Place of Business:

8895 N MILITARY TRAIL
SUITE 205-C
PALM BEACH GARDENS, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

8895 N MILITARY TRAIL
SUITE 205-C
PALM BEACH GARDENS, FL 33410 US

New Mailing Address:

FEI Number: 65-0934414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRANTHAM, KIRK
1860 FOREST HILL BOULEVARD
SUITE 105
WEST PALM BEACH, FL 33406 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: C
Name: STOKES, WILLIAM H
Address: 8895 N MILITARY TRAIL
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S
Name: SHERMAN, ANDREW
Address: 8895 N MILITARY TRAIL
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VC
Name: WRAGG, JOANNA
Address: 8895 N MILITARY TRAIL
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: T
Name: NICHOLS, D. ALAN
Address: 8895 N MILITARY TRAIL
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: P
Name: DAMBROT, DONNA L
Address: 8895 N MILITARY TRAIL
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby 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 all other like empowered.

SIGNATURE: THE REV. DONNA DAMBROT

P

02/02/2011

Electronic Signature of Signing Officer or Director

_____ Date