


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 08:00 AM
Secretary of State

DOCUMENT # N99000000877	
1. Entity Name ST. JOHN'S EPISCOPAL CHURCH FOUNDATION, INC.	

Principal Place of Business 211 N. MONROE ST. TALLAHASSEE, FL 32301	Mailing Address 211 N. MONROE ST. TALLAHASSEE, FL 32301
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01042008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3559596	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRAY, MELVIN K REV
 211 N. MONROE ST.
 TALLAHASSEE, FL 32301

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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, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000775342
 01/08/08-80026-010 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREA PERKINS, J. EARLE III 2107 EAST RANDOLPH CIRCLE TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCH SKELTON, BENSON L JR 1100 CARRIAGE ROAD TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC THOMAS, JOHN C III 1430 MILLSTREAM ROAD TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CH FONVIELLE, C. DAVID III 3755 BOBBIN MILL RD TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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

SIGNATURE: John Earle Perkins III, Treasurer 1/6/08 (850) 385-5713
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #