2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2006
Secretary of State

DOCUMENT# N99000005293

Entity Name: IONA-HOPE EPISCOPAL CHURCH, INC.

Current Principal Place of Business:

9650 GLADIOLUS DRIVE
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

9650 GLADIOLUS DRIVE
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 65-0960136 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TRIPP, THEODORE L JR.
2532 FIRST STREET
FORT MYERS, FL 33908 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: PD ( ) Delete
Name: ADLER, JOHN S
Address: 9650 GLADIOLUS DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: VD ( ) Delete
Name: PRATHER, THOMAS R
Address: 9650 GLADIOLUS DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: ST ( ) Delete
Name: FARRARA, MARGARET
Address: 9650 GLADIOLUS DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: SD ( ) Delete
Name: WELLES, PETER D
Address: 9650 GLADIOLUS DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete
Name: JON, ZOOK
Address: 9650 GLADIOLUS DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: D ( ) Delete
Name: NIXON, JILL
Address: 9650 GLADIOLUS DRIVE
City-St-Zip: FORT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change ( ) Addition
Name: GALYEAN, PAM
Address: 9650 GLADIOLUS DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: LOUDENBACK, DIXIE
Address: 9650 GLADIOLUS DRIVE
City-St-Zip: FORT MYERS, FL 33908

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JOHN S. ADLER P/D 02/08/2006

Electronic Signature of Signing Officer or Director — Date