

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 700424

**Entity Name:** ST. THOMAS' EPISCOPAL CHURCH

**Current Principal Place of Business:**

1200 SNELL ISLE BLVD. NE  
SAINT PETERSBURG, FL 33704

**Current Mailing Address:**

1200 SNELL ISLE BLVD. NE  
SAINT PETERSBURG, FL 33704 US

**FEI Number:** 59-0895914

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

RECTOR, WARDEN & VESTRY OF CHURCH  
1200 SNELL ISLE BLVD. NE  
SAINT PETERSBURG, FL 33704 US

*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

**Officer/Director Detail :**

Title           RECTOR  
Name           WHITLEY, RYAN R  
Address        100 BAY POINT DRIVE NE  
City-State-Zip: ST. PETERSBURG FL 33704

Title           SENIOR WARDEN  
Name           PARK, MARY JANE  
Address        515 BAYVIEW DR NE APT 3  
City-State-Zip: SAINT PETERSBURG FL 33702

Title           JUNIOR WARDEN  
Name           JENNINGS, MICHELLE  
Address        1515 15TH STREET N  
City-State-Zip: ST. PETERSBURG FL 33704

Title           TREASURER  
Name           LEAVINE, BARBARA ANN  
Address        1365 SNELL ISLE BLVD NE APT 3E  
City-State-Zip: ST. PETERSBURG FL 33704-2402

Title           SECRETARY  
Name           BARNES, BILL  
Address        4780 DOLPHIN CAY LN S APT 409  
City-State-Zip: ST. PETERSBURG FL 33711-4677

*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:** RYAN R. WHITLEY

**RECTOR**

**02/09/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date