| 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: RICHARD LUONI

I

Electronic Signature of Signing Officer/Director Detail

Name and Address of Current Registered Agent:

LUONI, RICHARD BYRON 2500 N WESTMORELAND DRIVE ORLANDO, FL 32804 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 | E RICHARD LUONI | | | 03/12/2020 | | |
|---------------------------|------------------------------------------|-----------------|--------------------------|------------|--|--|
| | Electronic Signature of Registered Agent | | | Date | | |
| Officer/Director Detail : | | | | | | |
| Title | TREASURER | Title | DIRECTOR | | | |
| Name | MAUGHAN, CRAIG | Name | JAMES, ERIC | | | |
| Address | 2877 OLD CASTLE DRIVE | Address | 109 WEST KING STREET | | | |
| City-State-Zip: | WINTER PARK FL 32792 | City-State-Zip: | ORLANDO FL 32804 | | | |
| Title | DIRECTOR | Title | PRESIDENT | | | |
| Name | FARINA, MICHAEL | Name | LUONI, RICHARD BYRON | | | |
| Address | 3218 ARDSLEY DRIVE | Address | 2500 N WESTMORELAND DRIV | E | | |
| City-State-Zip: | WINTER PARK FL 32789 | City-State-Zip: | ORLANDO FL 32804 | | | |
| Title | SECRETARY | | | | | |
| Name | JAMES, ERIC | | | | | |
| Address | 109 WEST KING STREET | | | | | |
| City-State-Zip: | ORLANDO FL 32806 | | | | | |

Certificate of Status Desired: Yes

FILED Mar 12, 2020 **Secretary of State** 5005611646CC

DOCUMENT# 701887

Entity Name: ST. MICHAEL'S CHURCH

Current Principal Place of Business:

2499 N. WESTMORELAND DR ORLANDO, FL 32804

Current Mailing Address:

2499 N. WESTMORELAND DR ORLANDO, FL 32804 US

FEI Number: 59-0782458

PRESIDENT

03/12/2020

Date