| Entity Name: ST. ALBAN S EPISCOPAL CHURCH, INC. | | 0997943970CC | | |
|--|---|--------------------------|---|----------------------|
| Current Prir | cipal Place of Business: | | 000104 | 577000 |
| 330 85TH AVE | | | | |
| ST PETERSBU | RG BEACH, FL 33706 | | | |
| Current Mai | ling Address: | | | |
| 330 85TH A\ | • | | | |
| | BURG BEACH, FL 33706 US | | | |
| | | | | |
| FEI Number: 59-0718486 Certificate | | | Certificate of Status Des | ired: No |
| Name and A | ddress of Current Registered Agent: | | | |
| | | | | |
| CONNER, GEO | RGENE D | | | |
| 2926 57TH ST \$ | SOUTH | | | |
| | SOUTH | | | |
| 2926 57TH ST S GULFPORT, FL | SOUTH | stered office or regis | tered agent, or both, in the State of Flo | prida. |
| 2926 57TH ST S GULFPORT, FL The above named | SOUTH . 33707 US | stered office or regis | tered agent, or both, in the State of Flo | orida. 02/13/2019 |
| 2926 57TH ST S GULFPORT, FL The above named | SOUTH . 33707 US I entity submits this statement for the purpose of changing its regis | stered office or regis | tered agent, or both, in the State of Flo | |
| 2926 57TH ST S GULFPORT, FL The above named | SOUTH 33707 US dentity submits this statement for the purpose of changing its regis E: GEORGENE D CONNER Electronic Signature of Registered Agent | stered office or regis | tered agent, or both, in the State of Flo | 02/13/2019 |
| 2926 57TH ST 3 GULFPORT, FL The above named SIGNATURE | SOUTH 33707 US dentity submits this statement for the purpose of changing its regis E: GEORGENE D CONNER Electronic Signature of Registered Agent | stered office or regis | tered agent, or both, in the State of Flo | 02/13/2019 |
| 2926 57TH ST S GULFPORT, FL The above named SIGNATURE | SOUTH 33707 US d entity submits this statement for the purpose of changing its regis E: GEORGENE D CONNER Electronic Signature of Registered Agent Ctor Detail : | | | 02/13/2019 |
| 2926 57TH ST S GULFPORT, FL The above named SIGNATURE Officer/Direc Title | SOUTH 33707 US dentity submits this statement for the purpose of changing its regis E GEORGENE D CONNER Electronic Signature of Registered Agent Ctor Detail : TREASURER | Title | OTHER, SENIOR WARDEN | 02/13/2019 |
| 2926 57TH ST S GULFPORT, FL The above named SIGNATURE Officer/Dired Title Name Address | SOUTH 33707 US d entity submits this statement for the purpose of changing its regis E GEORGENE D CONNER Electronic Signature of Registered Agent Ctor Detail : TREASURER MACCONNELL, JOSEPH | Title Name | OTHER, SENIOR WARDEN GALLAGHER, CHARLES III 6312 DARTMOUTH AVE N. | 02/13/2019 |
| 2926 57TH ST S GULFPORT, FL The above named SIGNATURE Officer/Dired Title Name Address | SOUTH 33707 US dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits this statement for the purpose of changing its regis dentity submits the purpose of changing its regis dentity | Title Name Address | OTHER, SENIOR WARDEN GALLAGHER, CHARLES III 6312 DARTMOUTH AVE N. | 02/13/2019 |
| 2926 57TH ST S GULFPORT, FL The above named SIGNATURE Officer/Dired Title Name Address City-State-Zip: | SOUTH 33707 US dentity submits this statement for the purpose of changing its regis E GEORGENE D CONNER Electronic Signature of Registered Agent Ctor Detail : TREASURER MACCONNELL, JOSEPH 1206 ROBIN ROAD SOUTH ST PETERSBURG FL 33707 | Title Name Address | OTHER, SENIOR WARDEN GALLAGHER, CHARLES III 6312 DARTMOUTH AVE N. | 02/13/2019 |

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: JOSEPH T MACCONNELL

417 41ST AVE City-State-Zip: ST PETE BEACH FL 33706

TREASURER

02/13/2019

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 702338

Address

Entity Name: ST. ALBAN'S EPISCOPAL CHURCH, INC

FILED Feb 13, 2019 **Secretary of State**

Date