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: SYLVIA FOSTER

Electronic Signature of Signing Officer/Director Detail

City-State-Zip: ST PETESBURG FL 33707

Title	VESTRY MEMBER			
Name	OTTINGER, DAVID			
Address	8600 GULF BLVD			
City-State-Zip:	ST. PETE BEACH FL 33706			

1206 ROBIN ROAD S

Officer/Director Detail :	
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	, , , , , , , , , , , , , , , , , , , ,	J	J.,,	
SIGNATURE	GEORGENE D CONNER			
	Electronic Signature of Registered Agent			
Officer/Dire	ctor Detail :			
Title	TREASURER	Title	OTHER, SENIOR WARDEN	
Name	FOSTER, SYLVIA	Name	GALLAGHER, CHARLES III	
Address	5950 PELOCAN BAY PLAZA S	Address	6312 DARTMOUTH AVE N.	
	APPT 1004	City-State-Zip:	ST. PETERSBURG FL 3371	
City-State-Zip:	GULFPORT FL 33707			
Title	SECRETARY	Title	VESTRY MEMBER	
		Name	PAUL, JOHN	
Name	MACCONNELL, JOSEPH			

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.

Name and Address of Current Registered Agent:

330 85TH AVE

330 85TH AVE

ST PETERSBURG BEACH, FL 33706 US

FEI Number: 59-0718486

CONNER, GEORGENE D 2926 57TH ST SOUTH GULFPORT, FL 33707 US

Address

Current Mailing Address:

ST PETERSBURG BEACH, FL 33706

DOCUMENT# 702338

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

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

Certificate of Status Desired: No

s III N. 33710 Address 9815 HARRELL DR. #901 TREASURE ISLAND FL 33706 City-State-Zip:

TREASURER

03/08/2016

Date

FILED Mar 08, 2016 Secretary of State CC1092213992

03/08/2016 Date