2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 04, 2022
Secretary of State
2190774210CC

DOCUMENT# 710640

Entity Name: EPISCOPAL CHILDREN'S SERVICES, INC.

Current Principal Place of Business:

8649 BAYPINE ROAD
SUITE 300, BUILDING 7
JACKSONVILLE, FL 32256

Current Mailing Address:

8649 BAYPINE ROAD
SUITE 300, BUILDING 7
JACKSONVILLE, FL 32256 US

FEI Number: 59-1146765

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH HULSEY & BUSEY, PROFESSIONAL ASSOCIATION
ONE INDEPENDENT DRIVE
SUITE 3300
JACKSONVILLE, FL 32202 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: STEPHEN D. MOORE 04/04/2022

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TRUSTEE
Name	HOWARD, SAMUEL J RT. REV.
Address	325 N MARKET ST
City-State-Zip:	JACKSONVILLE FL 32202

Title	CEO
Name	STOPHEL, CONNIE
Address	8649 BAYPINE ROAD SUITE 300, BUILDING 7
City-State-Zip:	JACKSONVILLE FL 32256

Title	TRUSTEE, VP
Name	AMMONS, WILEY FR.
Address	7500 SOUTHSIDE BLVD
City-State-Zip:	JACKSONVILLE FL 32256

Title	TRUSTEE
Name	POMPOSO, SARA LEUTZINGER
Address	112 W ADAMS ST 2ND FLR
City-State-Zip:	JACKSONVILLE FL 32202

Title	TRUSTEE, IMMEDIATE PAST PRESIDENT
Name	ADAMS, VICKI
Address	2387 LAKESHORE DR N
City-State-Zip:	FLEMING ISLAND FL 32003

Title	TRUSTEE, PRESIDENT
Name	FORD, THABATA
Address	800 PRUDENTIAL DR STE 214
City-State-Zip:	JACKSONVILLE FL 32207

Title	TRUSTEE
Name	BEYAH, MALACHI
Address	635 E 11TH ST
City-State-Zip:	JACKSONVILLE FL 32209

Title	TRUSTEE
Name	ALULA, YARED
Address	5000 BIG ISLAND DR
City-State-Zip:	JACKSONVILLE FL 32246

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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: CONNIE STOPHEL CEO 04/04/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title TRUSTEE
Name SMITH, KAREN ESTELLA
Address 14152 MAHOGANY AVE
City-State-Zip: JACKSONVILLE FL 32258

Title TRUSTEE, SECRETARY
Name SMITH, CHRISTINE
Address 800 PRUDENTIAL DRIVE
City-State-Zip: JACKSONVILLE FL 32207

Title TRUSTEE
Name WINTERBOTTOM, CHRISTIAN
Address 1 UNF DRIVE
City-State-Zip: JACKSONVILLE FL 32224

Title TRUSTEE
Name SPELLMAN, CHESTER
Address 2143 DEER RUN TRAIL
City-State-Zip: JACKSONVILLE FL 32246

Title TRUSTEE, TREASURER
Name DISHER, DESTINEE
Address 50 NORTH LAURA STREET
SUITE 1000
City-State-Zip: JACKSONVILLE FL 32202

Title TRUSTEE
Name WILDES, SUSAN
Address 4800 DEERWOOD CAMPUS PARKWAY
City-State-Zip: JACKSONVILLE FL 32246

Title TRUSTEE
Name THOMAS, JOHN
Address ONE INDEPENDENT DR
STE 3300
City-State-Zip: JACKSONVILLE FL 32202