

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713025

Entity Name: ALL SOULS' EPISCOPAL CHURCH FOUNDATION, INC.**Current Principal Place of Business:**4025 PINE TREE DR
MIAMI BEACH, FL 33140-3601**Current Mailing Address:**4025 PINE TREE DR
MIAMI BEACH, FL 33140-3601 US**FEI Number:** 23-7062126**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARR, TIMOTHY P. REV.
4025 PINE TREE DR
MIAMI BEACH, FL 33140-3601 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:** TIMOTHY P. CARR

03/17/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	S
Name	LOSAK, BONNIE MS
Address	4025 PINE TREE DR
City-State-Zip:	MIAMI BEACH FL 33140-3601

Title	DIRECTOR
Name	COLLINS, SHEILA MS
Address	2780 NE 183RD STREET, # 709
City-State-Zip:	AVENTURA FL 33160

Title	PRESIDENT
Name	HARRIMAN, MARY MRS.
Address	4201 ROYAL PALM AVENUE
City-State-Zip:	MIAMI BEACH FL 33140

Title	DIRECTOR
Name	JAMES, CARLTON MR.
Address	36 N.W. 6TH AVENUE 1107
City-State-Zip:	MIAMI FL 33128

Title	DIRECTOR
Name	GRIZZLE, CHARLES
Address	4025 PINE TREE DR
City-State-Zip:	MIAMI BEACH FL 33140-3601

Title	DIRECTOR
Name	GATHMAN, CHRISTOPHER
Address	4025 PINE TREE DR
City-State-Zip:	MIAMI BEACH FL 33140-3601

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: HARRIMAN , MARY , MRS.**PRESIDENT**

03/17/2021

Electronic Signature of Signing Officer/Director Detail

Date