

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732350

**Entity Name:** ST. CATHERINE OF ALEXANDRIA EPISCOPAL CHURCH, INC.

**Current Principal Place of Business:**

502 DRUID HILLS RD.  
TEMPLE TERRACE, FL 33617-0853

**Current Mailing Address:**

502 DRUID HILLS RD.  
TEMPLE TERRACE, FL 33617-0853

**FEI Number:** 59-6509496

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LATIMER, SUSAN J  
502 DRUID HILLS RD.  
TEMPLE TERRACE, FL 33617-0853 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           ALEWYNSE, MANON  
Address        301 WEST HANLON STREET  
City-State-Zip: TAMPA FL 33604

Title           TREASURER  
Name           BECHTEL, TERRY  
Address        5608 CANNONADE DRIVE  
City-State-Zip: WESLEY CHAPEL FL 33544

Title           SECRETARY  
Name           GIBBS, MELINDA  
Address        6717 JENNIFER DRIVE  
City-State-Zip: TEMPLE TERRACE FL 33617

Title           DIRECTOR  
Name           SCHULTZ, RICHARD  
Address        14307 CAPITOL DRIVE  
City-State-Zip: TAMPA FL 33613

*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:** TERRY BECHTEL

**TREASURER**

**01/28/2019**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date