2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733717

Entity Name: THE CHURCH OF OUR SAVIOUR (EPISCOPAL) INC,

FILED
Mar 03, 2016
Secretary of State
CC6189547812

Current Principal Place of Business:

C/O JAMES SHEVLIN 200 N.W. 3RD ST. OKEECHOBEE, FL 34972

Current Mailing Address:

C/O REV. JAMES SHEVLIN 200 N.W. 3RD ST. OKEECHOBEE, FL 34972 US

FEI Number: 59-2351322 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEVLIN, JAMES REV. 200 N.W. 3RD STREET OKEECHOBEE, FL 34972 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: REV. JAMES SHEVLIN 03/03/2016

Title

Title

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

NamePHARR, LAURIENameBANGERT, HOWARDAddress1504 SE 8TH DRIVEAddress1588 SW 35TH CIRCLE

#193

DIRECTOR

DIRECTOR

City-State-Zip: OKEECHOBEE FL 34974

City-State-Zip: OKEECHOBEE FL 34974

City-State-Zip: OKEECHOBEE FL 34974

Title TREASURER

Name MCALLISTER, MERLIN Name HAGAN, DIANE

Address 4648 N HWY 441 Address 301 SE 5TH STREET

City-State-Zip: OKEECHOBEE FL 34972 City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR

Name BRYANT, CAROL Name MUELLER, KAY

Address 1789 SW 12TH TERRACE Address 12155 SW ELSINOR DRIVE

City-State-Zip: OKEECHOBEE FL 34974 City-State-Zip: PORT SAINT LUCIE FL 34987

Title SECRETARY Title DIRECTOR
Name JAHNER, MELISA Name STARK, DIANA

Address 3241 NW 36TH AVENUE Address 6990 SW 9TH STREET

City-State-Zip: OKEECHOBEE FL 34972 City-State-Zip: OKEECHOBEE FL 34974

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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: LAURIE PHARR DIRECTOR 03/03/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

NameBUXTON, MARILYNAddress2517 SW 22ND CIRCLECity-State-Zip:OKEECHOBEE FL 34974