

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733717

Entity Name: THE CHURCH OF OUR SAVIOUR (EPISCOPAL) INC,**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**02/07/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name PHARR, LAURIE
Address 1504 SE 8TH DRIVE
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name BANGERT, HOWARD
Address 1588 SW 35TH CIRCLE
#193
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name LUCAS, JAMES
Address 2535 SE 31ST STREET
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name HARLOW, PEGGY
Address 13344 SW 16TH DRIVE
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name BOYD, DALLON
Address P.O. BOX 2673
City-State-Zip: OKEECHOBEE FL 34973

Title SECRETARY
Name JAHNER, MELISA
Address 3241 NW 36TH AVENUE
City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR
Name STARK, DIANA
Address 6990 SW 9TH STREET
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name BUXTON, MARILYN
Address 2517 SW 22ND CIRCLE
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: PAMELA SCHAEFER**TREASURER****02/07/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	TREASURER
Name	SCHAEFER, PAMELA
Address	2320 SW 3RD COURT
City-State-Zip:	OKEECHOBEE FL 34974