

2015 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 LUCAS
200 N.W. 3RD ST.
OKEECHOBEE, FL 34972**Current Mailing Address:**C/O JAMES LUCAS
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:**LUCAS, JAMES
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:** JAMES LUCAS

02/12/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

Title DIRECTOR
Name BULOT, FRED
Address 2827 SE 21ST COURT
City-State-Zip: OKEECHOBEE FL 34974

Title TREASURER
Name PENNINGTON, JOHN
Address 2802 SE 18TH TERRACE
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name MURRAY, TOM
Address 307 SE 8TH AVENUE
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name HAGAN, DIANE
Address 301 SE 5TH AVENUE
City-State-Zip: OKEECHOBEE FL 34974

Title DIRECTOR
Name MUELLER, KAY
Address 12155 SW ELSINOR DRIVE
City-State-Zip: PORT SAINT LUCIE FL 34987

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

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: JAMES LUCAS

DIRECTOR

02/12/2015

Electronic Signature of Signing Officer/Director Detail

Date