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: CARLA J ODELL

Electronic Signature of Signing Officer/Director Detail

# **Current Mailing Address:**

**DOCUMENT# 769708** 

8411 25TH STREET EAST PARRISH, FL 34219

8411 25TH STREET EAST PARRISH, FL 34219 US

# FEI Number: 59-2629809

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

SOUTHWEST FLORIDA, INCORPORATED Current Principal Place of Business:

VICKERS, ANNE M 8005 25TH ST. E. PARRISH, FL 34219 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

# **Officer/Director Detail :**

Title	TREA	Title	PRESIDENT
Name	VICKERS, ANNE M	Name	SMITH, DABNEY RT. REV
Address	8005 25TH ST. E.	Address	8005 25TH ST. E.
City-State-Zip:	PARRISH FL 34219	City-State-Zip:	PARRISH FL 34219
Title	EXDI	Title	VP
Title Name	EXDI ODELL, CARLA J	Title Name	VP FITZGERALD, KEVIN
Name	ODELL, CARLA J 8528 25TH ST E	Name	FITZGERALD, KEVIN

EXECUTIVE DIRECTOR 04/13/2018

Certificate of Status Desired: Yes

FILED Apr 13, 2018

Secretary of State

CC3431172437

# 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: THE EPISCOPAL CONFERENCE CENTER, DIOCESE OF

Date

d: Yes

Date