

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB - 1 PM 1:59

DOCUMENT # 708082 (3)
1. Corporation Name
FIRST BROTHERS CHURCH OF SARASOTA, FLORIDA, INC.

Principal Place of Business Mailing Address
150 NORTH SHADE AVE SARASOTA FL 34237
150 NORTH SHADE AVE SARASOTA FL 34237

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/09/1964	3a. Date of Last Report 04/15/1994
4. FEI Number 59-0999716	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent

GRAY, DANIEL
150 N. SHADE AVENUE
SARASOTA FL 34237

10. Name and Address of New Registered Agent

81 Name R. Wayne Messenger
82 Street Address (P.O. Box Number is Not Acceptable) 3366 Bailey Rd.
83
84 City Sarasota, FL
85 Zip Code 34237

11. Pursuant to the provisions of Sections 607.0502 and 607.1008, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *R. Wayne Messenger* R. Wayne Messenger 1/23/95
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE PD	ELLIOTT, LEO L 3850 SUGAR LANE SARASOTA, FL 00000
TITLE VD	SWOPE, DANA 5335 3RD ST. E BRADENTON FL
TITLE TD	STONE, MARTHA B 908 POMELO SARASOTA FL
TITLE S	BOWERS, MELINDA L 6316 MURDOCK AVE SARASOTA FL
TITLE	
TITLE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	R. Wayne Messenger
2.3 STREET ADDRESS	3366 Bailey Rd.
2.4 CITY-ST-ZIP	Sarasota, FL 34237
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Iris Helmuth
4.3 STREET ADDRESS	7140 Wilderness Ln
4.4 CITY-ST-ZIP	Sarasota, FL 34240
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Leo L. Elliott* Leo L. Elliott 1/20/95 (813) 366-4933
(Signature and typed or printed name of signing officer or director Date (Month/Year))