

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713134

FILED
Apr 03, 2009
Secretary of State

Entity Name: UNITY CHURCH OF SARASOTA, INCORPORATED

Current Principal Place of Business:

3023 PROCTOR ROAD
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

3023 PROCTOR ROAD
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 59-0967818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYERS, JOHN H.
27 FLETCHER AVE.,
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

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

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: CAPPS, TENNIE ANN
Address: 3971 COUNTRY VIEW DRIVE
City-St-Zip: SARASOTA, FL 34233

Title: VT () Delete
Name: WELLS, LINDA
Address: 3641 MERIDALE ROAD
City-St-Zip: SARASOTA, FL 34238

Title: ST () Delete
Name: WARLING, SUSAN
Address: 3611 CRYSTAL LAKES COURT
City-St-Zip: SARASOTA, FL 34235

Title: TT () Delete
Name: BOSTON, GLENN
Address: 7141 RUE DE PALISADES
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VT (X) Change () Addition
Name: DINOIA, GAIL
Address: 4444 DEER RIDGE PLACE
City-St-Zip: SARASOTA, FL 34233

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TENNIE ANN CAPPS

PT

04/03/2009

Electronic Signature of Signing Officer or Director

Date