

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

APPROVED
AND
FILED

95 MAR -2 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 716259

(7)

1. Corporation Name

SARA BAY BAPTIST CHURCH, INC.

Principal Place of Business

415 67TH AVENUE, WEST
BRADENTON FL 34207

Mailing Address

415 67TH AVENUE, WEST
BRADENTON FL 34207

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/26/1969

3a. Date of Last Report

03/29/1994

4. FEI Number

23-7062117

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status



\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes



Yes



No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

WILLIAMS, TEDD
1115 MANATEE AVE., WEST #250
BRADENTON FL 33506

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when renewing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	ROSS, WILLIAM
STREET ADDRESS	6616 3RD ST. CT. W.
CITY - ST - ZIP	BRADENTON FL
TITLE	D
NAME	CLARKE, PHIL
STREET ADDRESS	5339 18TH ST E
CITY - ST - ZIP	BRADENTON FL
TITLE	D
NAME	HUFFMAN, WILLIAM
STREET ADDRESS	7300 ARCTURAS DR.
CITY - ST - ZIP	SARASOTA FL
TITLE	T
NAME	PERKINS, DONALD
STREET ADDRESS	3584 GLEBE FARM ROAD
CITY - ST - ZIP	SARASOTA FL
TITLE	D
NAME	WEAVER, DONALD
STREET ADDRESS	116-57TH AVE E
CITY - ST - ZIP	BRADENTON FL
TITLE	S
NAME	GRAINGER, JAMES
STREET ADDRESS	4913-32ND ST E
CITY - ST - ZIP	BRADENTON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ 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 119.07(3)(b), 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 917, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

William L. Ross
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
William L. Ross

2-21-95

(Date)

(813) 756-5200

(Telephone Number)