717071

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	 ∋#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	



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12/13/06--01010--005 **35.00

SECRETARY OF STATE OF VISIONS OF FEB -5 PM 2: 23

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Faith Baptist Church of Saragota, Florida, Inc. (Name of Corporation)
DOCUMENT NUMBER: 7/707/
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Anderson (Name of Contact Person)
Faith Baptist Church (Firm/Company)
8751 Fruitville Rd. (Address)
Sarusota FL 34240 (City/State and Zip Code)
For further information concerning this matter, please call: y

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 29, 2006

DAVID ANDERSON FAITH BAPTIST CHURCH OF SARASOTA 8751 FRUITVILLE RD. SARASOTA, FL. 34240

SUBJECT: THE FAITH BAPTIST CHURCH OF SARASOTA, FLORIDA, INC.

Ref. Number: 717071

We have received your document for THE FAITH BAPTIST CHURCH OF SARASOTA, FLORIDA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Photo copies are not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Document Specialist

Letter Number: 706A00073086

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
	1. The name of the corporation: Faith Baptist Church of Sacasota, Florida, Inc. 2. The principal office address: 8751 Fruitville Rd. Sacasota, FL 34240
	3. The mailing address (if different): Same
	4. Date of incorporation/qualification: 08 27 1969 Document number: 717071
	5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
	AMMES ALEXANDER
	654 Treaton Way
	Usprey, FL 34229 2
×	6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): David Anderson 8751 Fruitville Rd (P.O. Box NOT acceptable)
	8751 Fruitville Rd
	Sarasota, FL 34240
	The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
	Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
¥	(Signature of an officer or director) JAMES R ALEXHOPER (Printed or typed name and title)
	I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
	Manuful Shalum 12-06-06 (Signature of Registered Agent) (Date)
	If signing on behalf of an entity:
	DAVID W. ANDERSON (Typed or Printed Name)

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEB, FL 32314
CR2E045 (8/05)