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 APR 19 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 758284 (4)

1. Corporation Name

CHURCH OF THE ANNUNCIATION, INC.

Principal Place of Business	Mailing Address
4408 GULF DRIVE HOLMES BCH FL 34217	P.O.BOX 978 ANNA MARIA FL 34216

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
11/03/1981	05/01/1994

4. FEI Number: 59-2346886 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 4408 Gulf Drive	26 P. O. Box 978
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Holmes Beach, FL	28 Anna Maria, FL
24 Zip 34217 / 25 Country Manatee	29 Zip 34216 / 30 Country Manatee

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
STEWART, THOMAS 2705 RIVERVIEW BLVD. BRADENTON FL 33505	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 _____ April 13, 1995
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE		☐ Change ☐ Addition
NAME	KESSLER,PETER	12 NAME		
STREET ADDRESS	4255 GULF DRIVE APT 107	13 STREET ADDRESS		
CITY-ST-ZIP	HOLMES BCH, FL 00000 34217	14 CITY-ST-ZIP		
TITLE	D	21 TITLE	D	☒ Change ☐ Addition
NAME	SPARKMAN, S. M.	22 NAME	Young, Dolly	
STREET ADDRESS	POST OFFICE BOX 1425	23 STREET ADDRESS	117 81st Street	
CITY-ST-ZIP	BRADENTON FL	24 CITY-ST-ZIP	Holmes Beach, FL 34217	
TITLE	D	31 TITLE	D	☒ Change ☐ Addition
NAME	COLLINS, CHRIS	32 NAME	Cagnina, Carol	
STREET ADDRESS	POST OFFICE BOX 795	33 STREET ADDRESS	306 73rd Street	
CITY-ST-ZIP	ANNA MARIA FL	34 CITY-ST-ZIP	Holmes Beach, FL 34217	
TITLE	T	41 TITLE		☐ Change ☐ Addition
NAME	LONG, CHARLOTTE	42 NAME		
STREET ADDRESS	6500 FLOTILLA DR #103	43 STREET ADDRESS		
CITY-ST-ZIP	HOLMES BEACH FL	44 CITY-ST-ZIP		
TITLE	D	51 TITLE	D	☒ Change ☐ Addition
NAME	BARBARA BERRY	52 NAME	Pearson, Robert	
STREET ADDRESS	P.O.BOX 727 N/A	53 STREET ADDRESS	920 51st Street West	
CITY-ST-ZIP	CORTEZ FL 34215	54 CITY-ST-ZIP	Bradenton, FL 34209	
TITLE	D	61 TITLE	D	☒ Change ☐ Addition
NAME	ZOLLER, ALICE	62 NAME	Brownell, Mary	
STREET ADDRESS	PO BOX 1132	63 STREET ADDRESS	5400 Gulf Drive, #22	
CITY-ST-ZIP	ANNA MARIE FL	64 CITY-ST-ZIP	Holmes Beach, FL 34217	

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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Charlotte Long Charlotte Long 4/13/95 (813) 778-1638
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000348