FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996 758284 **DOCUMENT** #

(4)

CHURC	H OF THE ANNUNCIATION,	INC.			
Principal Place	of Business	Mailing Address		T I O DILIZ CORREL DELIDE I DELIDE I DELIDE I FEBRU	LANGER NAME ANDER DER DER KERKEN NAME ANDER ANDER
4408 GULF DE HOLMES BCH		P.O.BOX 978 Anna Maria FL 34216			
				3. Date Incorporated or Qualif 11/03/1981	3a. Date of Last Report 04/19/1995
	Gulf Drive	2a. Mailing Address 26 P. O. Box	978	4. FEI Number 59-2346886	Applied For Not Applicable
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financin	9 \$5.00 May Be
	Beach, FL	28 Anna Maria,		Trust Fund Contribution	Added to Fees
Zip ∵∵ 27.21 =	Country	Zip 34216	Country		for intangible tax under s. 199.032,
34217		<u> </u>	Manatee	Florida Statutes	Yes X No
9. Name and Address of Current Registered Agent 81 Name				10. Name and Address of Ne	
Anne So				Scheffler Douglass	3
STEWART, THOMAS 2705 RIVERVIEW BLVD.			82 Street Add 2801	dress (P.O. Box Number is Not Acce Riverview Blvd. V	ptable)
	TON FL 33505		83		(ESL
			84 City Brad	denton oration submits this statement for the	FL 85 Zio Code 34205
11. Pursuant t	o the provisions of Sections 617.0502 a	nd 617.1508, Florida Statutes,	the above-named corpo	oration submits this statement for the	purpose of changing its registered office
or registere familiar wit	ed agent, or both, in the State of Florida h, and accept the obligations of Section	. Such change was authorized l n 617:9503. Florida Statutes.	by the corporation's bo	ard of directors. I hereby accept the	appointment as registered agent. I am
SIGNATURE 4		3		fler Douglass	4-24-96
	Signature, typed or printed name of registered agent ar	of title if applicable. (NOTE:	Registered Agent eignature requi	red when reinstating)	DAIL
12.	OFFICERS AND		13.		OFFICERS AND DIRECTORS IN 12
TITLE	D	™ DELETE	1.1 TITLE	D	Change 🛣 Addition
NAME	KESSLER,PETER		1.2 NAME	Robinson, Evan	1010
STREET ADDRESS	4255 GULF DRIVE APT 107	_	1.3 STREET ADDRESS	5806 Gulf Drive,	
CITY-ST-ZIP	HOLMES BCH, FL 00000 3421		1.4 City-St-Zip	Holmes Beach, FL	34217
TITLE	0	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	YOUNG, DOLLY		2.2 NAME		
STREET ADDRESS	117 81 ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	HOLMES BEACH FL	Figures	2. 4 City-St-ZiP		ET Alexander
THTLE	D CACAUNIA CAROL	DELETE	3.1 TITLE		Change Addition
NAME	CAGNINA, CAROL		3.2 NAME		
STREET ADDRESS	306 73 ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	HOLMES BEACH FL	DELETE	3.4. CITY - ST - ZIP	-m75	Change Addition
TITLE	LONG, CHARLOTTE		4.1 TITLE	T/D	Za change Automorp
NAME	6500 FLOTILLA DR #103		4. 2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS	HOLMES BEACH FL		1		
CITY-ST-ZIP TITLE	D DEMONTE	K] DELETE	4.4 CITY+ST-ZIP 5.1 TITLE	D	Change X Addition
NAME	PEARSON, ROBERT	Directo		Potter, Margaret	C C. Mary Market
STREET ADDRESS	920 W 51 ST		53 STREET ADDRESS	521 75th Street	
CITY-ST-ZIP	BRADENTON FL				34217
TITLE	D	DELETE	61 TITLE	nomico pedent PL.	Change Addition
NAME	BROWNELL, MARY	_	62 NAME		
STREET ADDRESS	5400 GULF DR #22		63 STREET ADDRESS		
CITY-ST-ZIP	HOLMES BEACH FL		6.4 CITY - ST - ZIP		
dili-di-ZIF	- Alf Alica Alica (afanonal) - anno 15 alica (ari	the above filters have all the artists	3.4 011 (1.31-21)	day the assessment a better in Caption	110 07(0)(I) Florido Ctabutas I further

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: has late and Charles signature and Typed on Printed name of Signature of Director Charlotte Long

4/24/96

(941) 778-1638

Daytime Phone #