

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90145 016 *****61.25

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DOCUMENT # 758284

1. Entity Name

CHURCH OF THE ANNUNCIATION, INC.



Principal Place of Business

**4408 GULF DRIVE
HOLMES BCH FL 34217**

Mailing Address

**P.O. BOX 978
ANNA MARIA FL 34216**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2346886**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**DOUGLASS, ANNE SCHEFFLER
2801 RIVERVIEW BLVD WEST
BRADENTON FL 34205**

7. Name and Address of New Registered Agent

Name **Goodwin, Beverly**

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

2401 88th Street Court N.W.

City **Bradenton**

FL

Zip Code **34216**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Beverly B. Goodwin for*

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

(NOTE: Registered Agent signature required when reinstating)

4/28/03

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **TRIPP, PAULA**
STREET ADDRESS **PO BOX 655**
CITY-ST-ZIP **ANNA MARIA FL 34216**

TITLE **D** ☐ Delete
NAME **ROBINSON, EVAN**
STREET ADDRESS **5806 GULF DRIVE, 101S**
CITY-ST-ZIP **HOLMES BEACH FL 34217**

TITLE **D** ☐ Delete
NAME **DE HAAN, DALE**
STREET ADDRESS **309 68TH STREET**
CITY-ST-ZIP **HOLMES BEACH FL 34217**

TITLE **T** ☐ Delete
NAME **LONG, CHARLOTTE**
STREET ADDRESS **6500 FLOTILLA DR #103**
CITY-ST-ZIP **HOLMES BEACH FL**

TITLE **D** ☐ Delete
NAME **COLLINS, CHRIS**
STREET ADDRESS **PO BOX 795**
CITY-ST-ZIP **ANNA MARIA FL 34216**

TITLE **D** ☒ Delete
NAME **BROWNELL, MARY**
STREET ADDRESS **5400 GULF DR #22**
CITY-ST-ZIP **HOLMES BEACH FL**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **Pepka, Ronald**
STREET ADDRESS **5009 44th Street West**
CITY-ST-ZIP **Bradenton, FL 34210**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Change ☒ Addition
NAME **Vedder, Barbara**
STREET ADDRESS **P. O. Box 1399**
CITY-ST-ZIP **Anna Maria, FL 34216**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charlotte Long

REQUIRED Charlotte Long

4/25/03

941 778-1638

CR2E037 (10/02)