2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700187

FILED Apr 03, 2006 Secretary of State

Entity Name: THE CORNERSTONE BAPTIST CHURCH OF SARASOTA, INC.

Current Principal Place of Business: New Principal Place of Business: 3308 17TH STREET

SARASOTA, FL 34235

Current Mailing Address: New Mailing Address:

3308 17TH STREET SARASOTA, FL 34235

FEI Number: 59-1412656 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DENT, JOHN DENT, JOHN C 330 S. ORANGE AVE 330 S. ORANGE AVE SARASOTA, FL 34236 US SARASOTA, FL 34236 US

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.

SIGNATURE: JOHN C. DENT 04/03/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete FULLFORD, TROY B Name: Name:

330 N LOCKWOOD RIDGE RD Address: Address: City-St-Zip: SARASOTA, FL 34237 City-St-Zip:

Title: TD Title: TD (X) Change () Addition () Delete BABCOCK, KAREN Name: BABCOCK, KAREN S Name: Address: 913 SARABAY RD. Address: 913 SARABAY RD.

City-St-Zip: OSPREY, FL 34229 City-St-Zip: OSPREY, FL 34229

Title: () Delete Title: VPD (X) Change () Addition DENT, JOHN DENT, JOHN C Name: Name:

660 GOLDEN GATE PT #62 660 GOLDEN GATE PT #62 Address: Address: City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236

Title: () Delete Title: (X) Change () Addition KURBAT, PAMELA A Name: Name: DINGESS, TRACI

250 HERONS RUN DRIVE #313 2149 WOOD HOLLOW WAY Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34235

Title: () Delete Title: () Change (X) Addition

SEARCY, BRIAN Name: Name:

275 HERON'S RUN DRIVE, #717 Address: Address: City-St-Zip: City-St-Zip: SARASOTA, FL 34232

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN S. BABCOCK TD 04/03/2006