

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 8:00 am
Secretary of State

04-19-2006 90083 048 ****61.25

DOCUMENT # 707014 1. Entity Name THE UNITARIAN UNIVERSALIST CHURCH OF SARASOTA, INC.					
Principal Place of Business 3975 FRUITVILLE ROAD SARASOTA, FL 34232			Mailing Address 3975 FRUITVILLE ROAD SARASOTA, FL 34232		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BEAUDREAU, DONALD W 3975 FRUITVILLE RD SARASOTA, FL 34232			Name Janet E. Newman Street Address (P.O. Box Number is Not Acceptable) 3975 Fruitville Road City Sarasota FL Zip Code 34232		
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 <i>Janet E. Newman</i>		SIGNATURE Janet E. Newman		DATE 04-16-06	
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	T <input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CURTIS, MICHAEL		NAME		
STREET ADDRESS	3422 TALLYWOOD LANE		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34237		CITY-ST-ZIP		
TITLE	VP <input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRADY, KATE		NAME		
STREET ADDRESS	5035 STEVENS DR.		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34234		CITY-ST-ZIP		
TITLE	S <input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KEENEY, MARIE		NAME	7159 Wild Horse Circle	
STREET ADDRESS	7159 WID HORSE CIRCLE		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34241		CITY-ST-ZIP		
TITLE	P <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	RAUDAUGH, JAMES		NAME		
STREET ADDRESS	3866 MIRA LAGO DRIVE		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34238		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	Diane Happy	
STREET ADDRESS			STREET ADDRESS	3422 Tallywood Lane	
CITY-ST-ZIP			CITY-ST-ZIP	Sarasota FL 34237	
TITLE	<input type="checkbox"/> Delete		TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	Gail Colella	
STREET ADDRESS			STREET ADDRESS	3614 Naranja Way	
CITY-ST-ZIP			CITY-ST-ZIP	Sarasota FL 34232	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Diane F. Happy</i>		SIGNATURE: Diane F. Happy, Treasurer		DATE: 04-16-06	

941-371-4974