

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707450

FILED
Feb 11, 2009
Secretary of State

Entity Name: THE FIRST CONGREGATIONAL UNITED CHURCH OF CHRIST OF SARASOTA, INC.

Current Principal Place of Business:

1031 SOUTH EUCLID AVENUE
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

1031 SOUTH EUCLID AVENUE
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 59-0896302

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERDUE, JOAN L.
2860 RIVIERA DRIVE
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: MORRIS, NANCY
Address: 3929 BREEZEMONT DRIVE
City-St-Zip: SARASOTA, FL 34232

Title: P () Delete
Name: KUHN, JOY
Address: 4587 FRIAR TUCK LANE
City-St-Zip: SARASOTA, FL 34232

Title: VP () Delete
Name: BABER, DAVE
Address: 4748 CHARING CROSS ROAD
City-St-Zip: SARASOTA, FL 34241

Title: S () Delete
Name: MCCALDEN, DONNA M
Address: 5566 MAGNOLIA TREE TERRACE
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: WEISS, ROGER
Address: 70848 WHITEMARSH CIRCLE
City-St-Zip: BRADENTON, FL 34202

Title: D () Delete
Name: GRUBB, PATRICIA
Address: 4541 WINDSOR PARK
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DONNA M MCCALDEN

S

02/11/2009

Electronic Signature of Signing Officer or Director

Date