2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 707450

FILED Apr 10, 2003 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 1031 SOUTH EUCLID AVENUE SARASOTA, FL 34237 **Current Mailing Address: New Mailing Address:** 1031 SOUTH EUCLID AVENUE SARASOTA, FL 34237 FEI Number: 59-0896302 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: PERDUE, JOAN L PERDUE, JOAN L 1506 MALLARD LANE 2860 RIVIERA DRIVE SARASOTA, FL 34239 US SARASOTA, FL 34232 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: 04/10/2003 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SICKS, JAMES, Name: Name: 4082 REDBIRD CIR Address: Address: City-St-Zip: SARASOTA, FL City-St-Zip: Title: () Delete Title: () Change () Addition Name: TUTT, JACQUELINE Name: Address: 2351 LAKESIDE MEWS Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip: Title: () Delete Title: () Change () Addition MOORE, WILLIAM Name: Name: 7826 TROON STREET Address: Address: City-St-Zip: BRADENTON, FL 34202 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WITTREN, SHARON R., Name: Address: 4520 GLEBE FARM RD. Address: City-St-Zip: SARASOTA, FL 00000. City-St-Zip: Title: () Delete Title: () Change () Addition GEIGER, KEN Name: Name: 4337 OAKVIEW Address: Address: City-St-Zip: SARASOTA, FL City-St-Zip: Title: () Delete Title: () Change () Addition SHORT, JOHN Name: Name: Address: 8109 FAIRHAVEN GLEN Address: UNIVERSITY PARK, FL 34201 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHARON R WITTREN S 04/10/2003