

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2006 08:00 AM
Secretary of State

DOCUMENT # 713430

1. Entity Name
SOUTH TRAIL CHURCH OF CHRIST, INC.



Principal Place of Business
5601 SOUTH TAMiami TRAIL
SARASOTA, FL 34231 US

Mailing Address
P O BOX 19825
SARASOTA, FL 34276-2825 US



01232005 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2465673	Applied For (Not Applicable)
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

COOK, BRUCE A
9201 PALMER BLVD
SARASOTA, FL 34240

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when re-stating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	COOK, BRUCE A
STREET ADDRESS	9201 PALMER BLVD
CITY - ST - ZIP	SARASOTA, FL 34240
TITLE	PD
NAME	HIPP, KENNETH O. JR.
STREET ADDRESS	4745 SPRING MEADOW LN
CITY - ST - ZIP	SARASOTA, FL 34233
TITLE	STD
NAME	MERRITT, HAROLD
STREET ADDRESS	8856 ETERA DR
CITY - ST - ZIP	SARASOTA, FL 34238
TITLE	D
NAME	PARK, DAVID
STREET ADDRESS	2408 APPALOOSA CIR
CITY - ST - ZIP	SARASOTA, FL 34240
TITLE	D
NAME	STILBER, TOM
STREET ADDRESS	6535 WATER FORD CIR
CITY - ST - ZIP	SARASOTA, FL 34238
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1100000413896
02/11/06-80013-007 61.25

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W.H. Merritt W.H. MERRITT

Date

1/23/06

Daytime Phone #

941-924-2057