2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

DOCUMENT # 715552

1. Entity Name

Principal Place of Business

SIGNATURE: 🗸

SUNNYSIDE MENNONITE CHURCH, INC.

1001 HONORE AVE. SARASOTA FL 34232-3001 US 2. Principal Place of Business		1001 Honore ave. Sarasota Fl. 34232-3003 US	SARASOTA FL 34232-3003		A 00394	137	Birii disii ibbi
		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN T	HIS SPACE	
City & State		City & State		4. FEI Numbe	FA 4000070		Applied For Not Applicable
Zip Country		Zip Country		5. Certificate of	5 Cortificate of Status Desired S		Additional
	6. Name and Address of Curre	nt Registered Agent	<u> </u>	7. Name and	Address of New Registe		
			Name				
MULLET, S			Street Address ((P.O. Box Number is Not Acceptable)		
1177 RUSS SARASOTA	SELL AVE. A FL 34232		City			FL Zip C	ode
SIGNATURE .	Signature, typed or printed name of registered as	9. Election Campaign	9. Election Campaign Financing \$5.0 Trust Fund Contribution.		Make Che	eck Payable nent of State	
	FEE IS \$61.25	, mast one somme			•		
10.	OFFICERS AND		11.	ADDITIONS/CHA	NGES TO OFFICERS AN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GINGERICH, MERVIN 1570 GRABER ST	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chang	ge Addition 3
TITLE NAME STREET ADDRESS	SARASOTA FL S MULLET, STANLEY 1177 RUSSELL AVE.	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>	☐ Chang	e Addition
CITY-ST-ZIP TITLE NAME	SARASOTA FL E YODER, HENRY J.	Delete	TITLE NAME STREET ADDRESS			☐ Chang	ge Addition
CITY-ST-ZIP	3407 TEAL AVE SARASOTA FL	· · · · · · · · · · · · · · · · · · ·	CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV YODER, BILL 6830 RICHARDSON RD SARASOTA FL 34240	□ Delete ~ ~	NAME STREET ADDRESS CITY-ST-ZIP			☐ Chang	ge 🗌 Addition {
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GINGERICH, LESTER J 1025 HONORE AVE	☐ Delete	TITLE NAME STREET ADDRESS GITY-ST-ZIP			☐ Chanç	ge Addition
TITLE NAME STREET ADDRESS	SARASOTA FL T MILLER, PERRY 5433 BAHIA VISTA ST	☐ Delete	TITLE NAME STREET ADDRESS CITY, ST. 7IP			☐ Chanç	ge Addition

12. I hereby certify that the information supplied with this filling does not qualify 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 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.

CLESTER J. GINGERICH 4-5-00 941 379-9600

FILED

Apr 17, 2000 8:00 am Secretary of State

04-17-2000 90007 014 ****70.00