2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

Mar 27, 2006 8:00 am Secretary of State **DOCUMENT #716259** 03-27-2006 90247 004 ****61.25 1. Entity Name SARÁ BAY BAPTIST CHURCH, INC. Principal Place of Business Mailing Address 415 67TH AVENUE, WEST 415 67TH AVENUE, WEST BRADENTON, FL 34207 **BRADENTON, FL 34207** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02202006 Cha-NP CR2E037 (11/05) City & State City & State 4. FEI Number Applied For 59-1479656 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired -Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VIPOND, FRASER A Street Address (P.O. Box Number is Not Acceptable) 6616 3RD ST. CT. W. BRADENTON, FL 34207 Zip Code 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. 2-23-06 e of registered agent and title if applical (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Due by May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TILE Delete TITLE VIPOND, FRASER A NAME NAME STREET ADDRESS 6616 3RD ST CT W STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34207 CITY-ST-ZIP BRANDON BROOKS Addition mr Delete TITLE NAME MOORE, JAMES G NAME 5212 87HAUE. DR.W. 6420 2ND AVENUE N.E. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34208 CITY-ST-ZIP BRADENTON, FL. 34209 ☐ Delete TITLE ☐ Change ☐ Addition CROWELL, JAMES NAME NAME STREET ADDRESS 3807 41ST ST. CT. W. STREET ADDRESS BRADENTON, FL 34205 CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE Change ☐ Addition MORRIS, CECIL F NAME NAME STREET ADDRESS 2706 39TH ST., W. STREET ADDRESS CITY-ST-ZIP **BRADENTON, FL 34205** CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-7IP CITY-ST-ZIP 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.

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