

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 720523

1. Entity Name
**SAWYER ROAD BAPTIST CHURCH SARASOTA,
FLORIDA, INC.**



Principal Place of Business
**5055 SAWYER ROAD
SARASOTA, FL 34233**

Mailing Address
**5055 SAWYER ROAD
SARASOTA, FL 34233**

FILED
Apr 16, 2007 08:00 AM
Secretary of State



04102007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-6531139

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**YOUNG, ROBERT W.
5045 SAWYER ROAD
SARASOTA, FL 33583**

**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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$81.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP YOUNG, ROBERT W PASTOR 5045 SAWYER ROAD SARASOTA, FL 00000,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HURLEY, JERRY C 6105 47TH AVE E BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HURLEY, JOAN K. 6105 47TH AVE E BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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04/25/07-80035-001 61.25

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: *Robert Young* **ROBERT YOUNG** 4/12/07 (941)921-6081
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #