2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Feb 02, 2004 08:00 AM **DOOUMENT # 722399** 1. Entity Name **Secretary of State** THIRD CHURCH OF CHRIST, SCIENTIST, SARASOTA. FLORIDA, INC. Principal Place of Business Mailing Address 7660 CURTISS AVENUE 7660 CURTISS AVENUE SARASOTA FL 34231 SARASOTA FL 34231 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) MOORE City & State City & State 4. FEI Number Applied For 23-7281257 Not Applicable Zíp Country Zip 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 Name FLINT, JAMES W Street Address (P.O. Box Number is Not Acceptable) 8599 WOODBRIAR DR SARASOTA FL 34238 City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change Addition MACINTIRE, JOAN NAME NAME 583 MEADOW SWEET CR. U00000029744 STREET ADDRESS STREET ADDRESS SARASOTA FL 34229 02/04/04-80079-006 61.25 CITY-ST-7IP CITY-ST-ZIP TITLE Delete ☐ Change Addition FLINT, JAMES W NAME NAME 8599 WOODBRIAR DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34238 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition BOARDMAN, DAWN NAME NAME 7239 CLOISTER DR STREET ADDRESS STREET ADDRESS SARASOTA FL 34231 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition KAPERNIK, BARBARA NAME NAME 7550 FAIRWAY WOODS DR STREET ADDRESS STREET ADDRESS SARASOTA FL 34231 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition GRIFTNER, NANCY NAME NAME 4979 WINDSOR PARK STREET ADDRESS STREET ADDRESS SARASOTA FL 34235 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition ESKEW, KIM G NAME NAME 1680 KELLY LN STREET ADDRESS STREET ADDRESS SARASOTA FL 34232 CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: SIGNATURE AND AVED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DESIGNATURE AND AVED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR