

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 724474

1. Entity Name
SUNRISE PRESBYTERIAN CHURCH, INC.



FILED
Mar 03, 2005 8:00 am
Secretary of State

03-03-2005 90178 028 ****61.25

Principal Place of Business
**18400 N.W. 68TH AVE.,
HIALEAH, FL 33015**

Mailing Address
**18400 N.W. 68TH AVE.,
HIALEAH, FL 33015**



2. Principal Place of Business

3. Mailing Address

02092005 Chg-NP CR2E037 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-1793014

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~WALTON, AGNUS~~
**18400 N.W. 68TH AVE.,
HIALEAH, FL 33015**

Name
MARIA REGALADO
Street Address (P.O. Box Number is Not Acceptable)
18400 NW 68th Avenue
City **Hialeah** FL Zip Code **33015**

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

M. Regalado

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

(NOTE: Registered Agent signature required when reinstating)

3/1/05
DATE

Filing Fee is \$61.25
Due by May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
GREEN, RANDOLPH ☒ Delete
18400 N.W. 68TH AVE.,
HIALEAH, FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
VINENT, ALBERTO ☒ Delete
2801 SW 193 TERR.
MIRAMAR, FL 33029

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WALTON, ANGUS ☒ Delete
18400 N.W. 68TH AVE.,
HIALEAH, FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TR
STOCKER, JOHN ☐ Delete
18175 NW 21 ST.
PEMBROKE PINES, FL 33029

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CHARLES CUNNINGHAM ☐ Change ☒ Addition
18400 NW 68 AVE
HIALEAH FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VID
HENRY WICKETT ☐ Change ☒ Addition
18400 NW 68 AVE
HIALEAH FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T/D
CELIA PACAECO ☐ Change ☒ Addition
18400 NW 68 AVE
HIALEAH FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S/D ☒ Change ☐ Addition
18400 NW 68 AVE
HIALEAH FL 33015

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

C. E. Cunningham

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/05 3/821-5841

Date Daytime Phone #