

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 12, 2007 8:00 am
Secretary of State

07-12-2007 90055 049 ****61.25

DOCUMENT # 725855		
1. Entity Name SARASOTA CHRISTIAN CHURCH INC		

Principal Place of Business 2923 ASHTON RD. SARASOTA, FL 34231	Mailing Address 2923 ASHTON RD. SARASOTA, FL 34231
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40124300



07082007 Chg-NP CR2E037 (12/06)

6. Name and Address of Current Registered Agent	
LAGASSE, JIM 4632 ATLANTIC AVE SARASOTA, FL 34233	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL 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 _____

Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	E STAPLETON, ROY 5700 BENT GRASS RD SUITE 211 SARASOTA, FL 34235 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	T HAROLD ASHBY 4661 MACCACHEN SARASOTA, FL 34233 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T MARINELLI, GENE 2610 WOODGATE LANE SARASOTA, FL 34231 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PARSLEY, WALLY 2264 LOCKWOOD MEADOWS WAY SARASOTA, FL 34234 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PC LAGASSE, JIM 4632 ATLANTIC AVE SARASOTA, FL 34233 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T GREENE, MARILEE 146 INLETS BLVD. NOKOMIS, FL 34275 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	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 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: James A. LoDorse 7/10/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #