

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90060 003 ****61.25

DOCUMENT # 726713

1. Corporation Name

THE PHILADELPHIA CHURCH, INC.

Principal Place of Business

1024 CATTLEMAN RD.
SARASOTA FL 34232

Mailing Address

1024 CATTLEMAN RD.
SARASOTA FL 34232



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

06/15/1973

4. FEI Number

05-0031300

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

LACHER, CATHERINE L
1770 LOGSDON ST
NORTH PORT FL 34287

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE
NAME LACHER, CATHERINE L
STREET ADDRESS 1770 LOGSDON ST
CITY-ST-ZIP NORTH PORT FL 34087

TITLE D ☐ DELETE
NAME STOTZ, RON
STREET ADDRESS 3411 CEDAR ST
CITY-ST-ZIP ELLENTON FL

TITLE D ☐ DELETE
NAME PETERSON, RAY
STREET ADDRESS 1015 7TH AVE. E.
CITY-ST-ZIP BRADENTON FL

TITLE ST ☒ DELETE
NAME FLOYD, LUCILE
STREET ADDRESS 1024 CATTLEMAN RD.
CITY-ST-ZIP SARASOTA FL

TITLE D ☐ DELETE
NAME FLOYD, K. JASON
STREET ADDRESS 1024 CATTLEMAN RD.
CITY-ST-ZIP SARASOTA FL

TITLE D ☐ DELETE
NAME BENNETT, RUTH
STREET ADDRESS 5421 15TH ST. E.
CITY-ST-ZIP BRADENTON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME ST
4.3 STREET ADDRESS Alan D. Hughes
4.4 CITY-ST-ZIP 349 Apollo Beach Blvd.
Apollo Beach Fl. 33572

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Catherine L. Harris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-24-99

941 497 0650

CR2E037 (1/98)