

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 11, 2006 8:00 am
Secretary of State

05-11-2006 90235 020 ****61.25

DOCUMENT # 726713

1. Entity 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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number
05-0031300

Applied For
Not Applicable

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

LACHER, CATHERINE L
1023 JAKL AVE
SARASOTA FL 34232

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 reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

TITLE P ☐ Delete
NAME LACHER, CATHERINE L
STREET ADDRESS 1023 JAKL AVE
CITY-ST-ZIP SARASOTA FL 34232

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

TITLE D ☐ Delete
NAME ~~CARBETT, TERRY~~
STREET ADDRESS ~~3895 HAWKEYE CIRCLE~~
CITY-ST-ZIP ~~SARASOTA FL 34232~~

TITLE ST ☐ Delete
NAME HUGHES, ALAN D
STREET ADDRESS ~~349 APOLO BEACH BLVD~~
CITY-ST-ZIP ~~APOLO BEACH FL 33572~~

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

TITLE D ☐ Delete
NAME FULKERT, GREG
STREET ADDRESS 4897 WILD DOVE LANE
CITY-ST-ZIP SARASOTA FL 34232

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE ☐ Change ☒ Addition
NAME SHARON MYERS
STREET ADDRESS 9727 SE 164th Pl.
CITY-ST-ZIP Summerfield, FL 34491

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS 6511 SUMMER COVE DR.
CITY-ST-ZIP RIVERVIEW, FL 33569

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

K. Jason Floyd K. Jason Floyd 04/26/06

371-2865