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Feb 11 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 731621 (9)
1. Corporation Name
SUNRISE CHURCH, INC.



Principal Place of Business Mailing Address
7400 SW 117TH AVE 15021 S.W. 146 STREET
MIAMI FL 33183 MIAMI FL 33196-2322
US US

3. Date Incorporated or Qualified 01/16/1975 3a. Date of Last Report 02/09/1996

2. Principal Place of Business		2a. Mailing Address		4. FEI Number 51-0166465		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.				Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution ☒		\$5.00 May Be Added to Fees	
24 Country		29 Country		30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLAUS, REV JEREMIAH
15021 S.W. 146 STREET
MIAMI FL 33196

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	SHETZLINE, FLORENCE	1.2 NAME	Shetzline, Florence
STREET ADDRESS	8760 SW 133 AVE RD., 318	1.3 STREET ADDRESS	15021 S.W. 146 Street
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami, FL 33196
TITLE	PD	2.1 TITLE	PD
NAME	CLAUS, REV. JEREMIAH	2.2 NAME	Claus, Rev. Jeremiah
STREET ADDRESS	8760 SW 133RD AVE RD, #320	2.3 STREET ADDRESS	15021 S.W. 146 Street
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	Miami, FL 33196
TITLE	STD	3.1 TITLE	STD
NAME	CLAUS, JESSIE	3.2 NAME	Claus, Jessie
STREET ADDRESS	8760 SW 133RD AVE RD. #320	3.3 STREET ADDRESS	15021 S.W. 146 Street
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	Miami, FL 33196
TITLE	VD	4.1 TITLE	VD
NAME	CLAUS, DEBORAH	4.2 NAME	Claus, Deborah
STREET ADDRESS	8760 SW 133 AVE RD., 318	4.3 STREET ADDRESS	15021 S.W. 146 Street
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	Miami, FL 33196
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE Rev. Jeremiah Claus 1/10/97 (305) 378-6609

CR2E037 (9/96)