2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# 731621

Entity Name: SUNRISE CHURCH, INC.

Current Principal Place of Business:

3444 DOVE HOLLOW CT.
PALM HARBOR, FL 346832211 US

New Principal Place of Business:

Current Mailing Address:

3444 DOVE HOLLOW CT.
PALM HARBOR, FL 346832211 US

New Mailing Address:

FEI Number: 51-0166465 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLAUS, JEREMIAH REV
3444 DOVE HOLLOW CT.
PALM HARBOR, FL 346832211 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	COCKER -NEWTON, SHERI	
Address:	3647 SCARLET TANAGER DR	
City-St-Zip:	PALM HARBOR, FL 34683	
Title:	PD	( ) Delete
Name:	CLAUS, REV. JEREMIAH	
Address:	3444 DOVE HOLLOW CT	
City-St-Zip:	PALM HARBOR, FL 34683	
Title:	STD	( ) Delete
Name:	CLAUS, JESSIE	
Address:	3444 DOVE HOLLOW CT	
City-St-Zip:	PALM HARBOR, FL 34683	
Title:	VD	( ) Delete
Name:	CLAUS, DEBORAH	
Address:	3444 DOVE HOLLOW CT	
City-St-Zip:	PALM HARBOR, FL 34683	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	D	(X) Change ( ) Addition
Name:	COKER -NEWTON, SHERI	
Address:	1823 OLD VILLAGE WAY	
City-St-Zip:	OLDSMAR, FL 34677	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEREMIAH CLAUS PD 03/24/2009

Electronic Signature of Signing Officer or Director — Date