

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739934

FILED
Jan 21, 2008
Secretary of State

Entity Name: TRINITY CHAPEL OF SARASOTA, INC.

Current Principal Place of Business:

3939 WEBBER STREET
SARASOTA, FL 34232 US

New Principal Place of Business:

Current Mailing Address:

3939 WEBBER STREET
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 59-1941237

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWELL, GEORGE M.
7564 CAMMINARE DR
SARASOTA, FL 34238 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: C () Delete
Name: SEEBACH, RANDY
Address: 519 HANCOCK AVE
City-St-Zip: SARASOTA, FL 34239

Title: PD () Delete
Name: NEWELL, GEORGE M
Address: 7564 CAMMINARE DR
City-St-Zip: SARASOTA, FL 34238

Title: D () Delete
Name: MENARD, AJ
Address: 945 SUNRISE RD
City-St-Zip: VENICE, FL 34293

Title: T () Delete
Name: BIRCH, LESLIE J MR.
Address: 1936 INGRAM AVENUE
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: COWAN, SCOTT
Address: 2720 WILKINSON ROAD
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: DIMEO, FRANK
Address: 3901 NOTTINGHAM DR
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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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: LESLIE J BIRCH

MR.

01/21/2008

Electronic Signature of Signing Officer or Director

Date