## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#755036**

FILED Feb 15, 2007 Secretary of State

Entity Name: SUNRISE COMMUNITY EVANGELICAL FREE CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

298 AQUATIC DR.

ATLANTIC BEACH, FL 32233

Current Mailing Address: New Mailing Address:

298 AQUATIC DR.

ATLANTIC BEACH, FL 32233

FEI Number: 59-1893897 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOODHAM, BRANAN MR 2356 COVINGTON CREEK DRIVE W. JACKSONVILLE, FL 32224 US DUNLOP, ANGUS MR 2033 MARYE BRANT LOOP N. NEPTUNE BEACH, FL 32266 US

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: ANGUS DUNLOP 02/15/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: P ( ) Delete Title: P (X) Change ( ) Addition

Name:WOODHAM, BRANANName:DUNLOP, ANGUS MR.Address:2356 COVINGTON CREEK DRIVE W.Address:2033 MARYE BRANT LOOP N.City-St-Zip:JACKSONVILLE, FL 32224 USCity-St-Zip:NEPTUNE BEACH, FL 32266 US

Title: S () Delete Title: S (X) Change () Addition Name: MAUTHE, STEVEN Name: BROWN, JAMES DR.

Name: MAUTHE, STEVEN Name: BROWN, JAMES DR.

Address: 2263 EAGLES NEST ROAD Address: 365 PABLO POINT DRIVE

City-St-Zip: JACKSONVILLE, FL 32246 US City-St-Zip: JACKSONVILLE, FL 32225 US

Title: () Delete Title: (X) Change ( ) Addition WAPPES, DALE Name: ROBERTS, WARREN MR. Name: 1885 BEACH AVENUE 1825 TWELVE OAKS LANE W. Address: Address: City-St-Zip: ATLANTIC BEACH, FL 32233 US City-St-Zip: NEPTUNE BEACH, FL 32266 US

 Title:
 ( ) Delete
 Title:
 VP ( ) Change (X) Addition

 Name:
 DUPERAULT, HERMAN MR.

 Address:
 Address:
 3078 MERRILL BOULEVARD

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250 US

I hereby certify that the information supplied with this filing does not qualify for the 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: ANGUS DUNLOP P 02/15/2007