



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2008 8:00 am
Secretary of State

02-28-2008 90005 026 ****61.25

DOCUMENT # 758284			
1. Entity Name CHURCH OF THE ANNUNCIATION, INC.			
Principal Place of Business 4408 GULF DRIVE HOLMES BCH, FL 34217		Mailing Address 4408 GULF DRIVE HOLMES BCH, FL 34217	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		02112008 Chg-NP CR2E037 (12/06)	
		4. FEI Number 59-2346886	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
DUNCAN, R ANDREW 107 81ST STREET BRADENTON BEACH, FL 34217		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBINSON, EVAN	NAME	Joan Oster
STREET ADDRESS	5806 GULF DRIVE, #101S	STREET ADDRESS	11335 Perico Isle Circle
CITY-ST-ZIP	HOLMES BEACH, FL 34217	CITY-ST-ZIP	Bradenton, FL 34209
TITLE	PD <input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETTUS, JANET	NAME	
STREET ADDRESS	4204 MARINA CT	STREET ADDRESS	
CITY-ST-ZIP	CORTEZ, FL 34215	CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> Delete	TITLE	
NAME	WAIT, WILLIAM	NAME	
STREET ADDRESS	101 12TH AVE W	STREET ADDRESS	
CITY-ST-ZIP	PALMETTO, FL 34221	CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> Delete	TITLE	
NAME	LEWIS, JACK N	NAME	
STREET ADDRESS	2365 LANDINGS CIRCLE N.W.	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34209	CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	PD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SIMMONS, DANIEL	NAME	Collins, Christopher
STREET ADDRESS	104 79TH ST	STREET ADDRESS	103 Willow Avenue
CITY-ST-ZIP	HOLMES BEACH, FL 34217	CITY-ST-ZIP	Anna Maria, FL 34216
TITLE	D <input type="checkbox"/> Delete	TITLE	
NAME	HUSSEY, RICHARD	NAME	
STREET ADDRESS	6602 23RD AVENUE WEST	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34209	CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 		JACK N. LEWIS 2-18-08 941-778-1638	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	