


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2007 8:00 am
Secretary of State

01-29-2007 90073 046 ****61.25

DOCUMENT # 769111
 1. Entity Name
 SEBASTIAN CHRISTIAN CHURCH, INC.



Principal Place of Business Mailing Address
 190 DAY DRIVE 190 DAY DRIVE
 SEBASTIAN, FL 32958 US SEBASTIAN, FL 32958

60008229



01212007 No Chg-NP CR2E037 (4/06)

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4. FEI Number 59-2301880	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
 MILLER, WILLIAM E
 1028 21 ST COURT
 VERO BEACH, FL 32960

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PREIKSCHAT, BOB 904 AMARYLLIS DR BAREFOOT BAY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, WILLIAM E 1028 21ST CT VERO BEACH, FL <i>William E. Miller</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HESS, FRED 437 CONCHA DR SEBASTIAN, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUY, THOMAS A 640 10TH ST. SW VERO BEACH, FL 32962
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *William E. Miller* 1-22-07 772
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
 WILLIAM E. MILLER 358-0410