

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002813

FILED  
Jan 28, 2008  
Secretary of State

**Entity Name:** CHURCH OF CHRIST OF SUNRISE, INC.

**Current Principal Place of Business:**

6299 W SUNRISE BLVD  
110  
SUNRISE, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

5721 NW 62 MANOR  
PARKLAND, FL 33067

**New Mailing Address:**

**FEI Number:** 65-1117750

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ETIENNE, PIERRE  
5721 NW 62 MANOR  
PARKLAND, FL 33067 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: ETIENNE, PIERRE  
Address: 5721 NW 62 MANOR  
City-St-Zip: PARKLAND, FL 33067

Title: T ( ) Delete  
Name: CADET, MARKEL  
Address: 2831 E SUNRISE BLVD # 101  
City-St-Zip: SUNRISE, FL 33322

Title: T ( ) Delete  
Name: ANACREON, HENRY  
Address: 336 NE 118 ST  
City-St-Zip: MIAMI, FL 33161

Title: SD ( ) Delete  
Name: ETIENNE, MAGY  
Address: 5721 NW 62 MANOR  
City-St-Zip: PARKLAND, FL 33067

**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  
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: MAGY ETIENNE

SD

01/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date