

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007402

FILED
Apr 28, 2004
Secretary of State

Entity Name: CHURCH OF SCIENTOLOGY MISSION OF SARASOTA, INC.

Current Principal Place of Business:

6576 SUPERIOR AVE
SARASOTA, FL 342315836

New Principal Place of Business:

Current Mailing Address:

6576 SUPERIOR AVE
SARASOTA, FL 342315836

New Mailing Address:

FEI Number: 65-1125042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILHITE, VIRGIL S III
8701 SEMINOLE BLVD
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

GILBERT, JUDITH A
300 S. PROSPECT AVE
CLEARWATER, FL 33756 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: JUDITH A. GILBERT

04/28/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WILHITE, COLLEEN
Address: 6576 SUPERIOR AVE
City-St-Zip: SARASOTA, FL 342315836

Title: D () Delete
Name: THOMAS, SUSAN
Address: 6576 SUPERIOR AVE
City-St-Zip: SARASOTA, FL 342315836

Title: D () Delete
Name: HALE, JAN
Address: 6576 SUPERIOR AVE
City-St-Zip: SARASOTA, FL 342315836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILHITE, COLLEEN R
Address: 6576 SUPERIOR AVE
City-St-Zip: SARASOTA, FL 342315836

Title: D (X) Change () Addition
Name: INGRAM, NADIA
Address: 6576 SUPERIOR AVE
City-St-Zip: SARASOTA, FL 342315836

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: COLLEEN R. WILHITE

D

04/28/2004

Electronic Signature of Signing Officer or Director

Date