2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003380

FILED Jan 18, 2005 Secretary of State

Entity Name: CHRIST ANGLICAN CHURCH OF MANASOTA, INC.

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

5639 MILTON AVENUE SARASOTA, FL 34243

Current Mailing Address: New Mailing Address:

5639 MILTON AVENUE P. O. BOX 1053

SARASOTA, FL 34243 TALLEVAST, FL 34270

FEI Number: 20-0768837 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:

BRADSHAW, JEFFREY R
7208 SPUR COURT
5639 MILTON AVENUE
SARASOTA, FL 34243 US
SARASOTA, FL 34243 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: JAMES T. MURPHY+ 01/18/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MURPHY, REV JAMES T
 Name:
 MURPHY, JAMES T REV'D

 Address:
 5639 MILTON AVENUE
 Address:
 5639 MILTON AVENUE

Address: 5639 MILTON AVENUE
City-St-Zip: SARASOTA, FL 34243
Address: 5639 MILTON AVENUE
City-St-Zip: SARASOTA, FL 34243
City-St-Zip: SARASOTA, FL 34243

Title: V () Delete Title: () Change () Addition

 Name:
 BRADSHAW, GARY
 Name:

 Address:
 7208 SPUR COURT
 Address:

 City-St-Zip:
 SARASOTA, FL 34243
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 PUGH, MELVIN
 Name:

 Address:
 5855 LAKESIDE WOODS CIRCLE
 Address:

 City-St-Zip:
 SARASOTA, FL 34243
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 CLINE, JOANNE
 Name:

 Address:
 5623 29TH ST. EAST
 Address:

 City-St-Zip:
 BRADENTON, FL 34203
 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: JAMES T. MURPHY+ PRES 01/18/2005