

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90408 050 \*\*\*\*61.25

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<b>DOCUMENT # N05000007696</b> 1. Entity Name CHILD EVANGELISM FELLOWSHIP, SUNCOAST CHAPTER INC.					
Principal Place of Business 5000 38TH AVENUE NORTH ST. PETERSBURG, FL 33710			Mailing Address 5000 38TH AVENUE NORTH ST. PETERSBURG, FL 33710		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-0766966	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent METTETAL, BRENDA 5000 38TH AVENUE NORTH ST. PETERSBURG, FL 33710				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				\$8.75 Additional Fee Required	
SIGNATURE <i>Brenda Mettetal</i> <i>bookkeeper</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				DATE	
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C SWEET, LISA 630 KIRKWOOD TERR N ST. PETERSBURG, FL 33701		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC SUDDUTH, PERRY 7102 77TH ST. PINELLAS PARK, FL 33781		TITLE NAME STREET ADDRESS CITY-ST-ZIP	M WILSON, ANN 4144 57th St. N. UNIT 108 KENNETH CITY, FL 33709	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PITTS, SANDRA 7360 ULMERTON RD., #27D LARGO, FL 33771		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T FLANAGAN, TOM 6125 10TH AVE.S. GULFPORT, FL 33707		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M CALCATERRA, CAROLYN 34177 RIVERSTONE ST. WEBSTER, FL 33597		TITLE NAME STREET ADDRESS CITY-ST-ZIP	M UPMAN, WALT 3698 18th AVE N ST. PETERSBURG, FL 33713	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M SWEET, DAN 630 KIRKWOOD TERR.N. ST. PETERSBURG, FL 33701		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <i>Lisa H Sweet</i> <i>Lisa H Sweet</i> <i>3/21/06</i> <i>823-0296</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					