

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N08088 (9)

1. Corporation Name

THE CHURCH AT SIESTA BAY, INC.



Principal Place of Business

11766 CARAVEL CIRCLE
FT. MYERS FL 33908

Mailing Address

11766 CARAVEL CIRCLE
FT. MYERS FL 33908

3. Date Incorporated or Qualified

03/11/1985

3a. Date of Last Report

07/10/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2725351

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STOCKHAM, SUSAN L.
2520 SOUTH TAMiami TRAIL
SARASOTA FL 34239

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE CD
NAME KAUFFMAN, RUSSELL R.
STREET ADDRESS 11766 CARAVEL CIRCLE
CITY-ST-ZIP FT. MYERS FL 33908 ☐ DELETE

TITLE SD
NAME HANST, GEORGENE
STREET ADDRESS 16579 CORIANDER
CITY-ST-ZIP FT. MYERS FL 33908 ☐ DELETE

TITLE TD
NAME MIHAL, MILAN
STREET ADDRESS 1153 OTTOWA TRAIL
CITY-ST-ZIP FT. MYERS FL 33931 ☐ DELETE

TITLE AT
NAME HENDRICKS, HOWARD
STREET ADDRESS 1302 MCGREGOR PARK
CITY-ST-ZIP FT. MYERS FL 33908 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME Same ☐ Change ☐ Addition
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME Same ☐ Change ☐ Addition
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE TD ☒ Change ☐ Addition
3.2 NAME HOWARD HENDRICKS
3.3 STREET ADDRESS 1302 MCGREGOR PARK
3.4 CITY-ST-ZIP FORT MYERS, FL. 33908

4.1 TITLE AT ☒ Change ☐ Addition
4.2 NAME ROSE BUTZIN
4.3 STREET ADDRESS 16981 Summerlin Rd.-#H-271
4.4 CITY-ST-ZIP Ft. Myers, FL. 33908

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Russell R. Kauffman, C/Director

April 6, 1996

Date

941-466-6540

Daytime Phone #

CR2E037 (12/95)