

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90049 041 ****61.25

DOCUMENT # N13346

1. Entity Name

**CHURCH OF LIGHT/WEDDING CHAPEL OF LOVE/CHAPEL
OF LOVE MINISTRIES/GYPSY ROSE CATERING INC.**



Principal Place of Business

**10115 CORTEZ RD
BRADENTON FL 34209**

Mailing Address

**P O BOX 606
TALLEVAST FL 34270**

50012511



1st MOORE

CR2E037 (10/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2533395

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SUMRALL, SHARI
2186 WILLOUGHBY ST
PORT CHARLOTTE FL 33980**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

T ☐ Delete
NAME JOHNSON, ANNELIES
STREET ADDRESS 3202 65TH ST W
CITY-ST-ZIP BRADENTON FL

D ☐ Delete
NAME JUDAY, MARION
STREET ADDRESS 200 MEADOW LANE ELM ST APT #25
CITY-ST-ZIP CONSTANTINE MI 49042 *Deceased*

D ☐ Delete
NAME SUMRALL, ROBERT SR
STREET ADDRESS 2186 WILLOUGHBY ST
CITY-ST-ZIP PORT CHARLOTTE FL 33980

P ☐ Delete
NAME SUMRALL, SHARI
STREET ADDRESS 2186 WILLOUGHBY ST
CITY-ST-ZIP PORT CHARLOTTE FL 33980

VD ☐ Delete
NAME SUMRALL, ROBERT
STREET ADDRESS 2186 WILLOUGHBY ST
CITY-ST-ZIP PORT CHARLOTTE FL 33980

D ☐ Delete
NAME EDWARD MANN
STREET ADDRESS 1922 MANGOE ST.
CITY-ST-ZIP PORT CHARLOTTE, FL. 33980

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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: REV. SHARI SUMRALL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-05

Date

941-766-0251

Daytime Phone #