## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

(0)

FAITH CHRISTIAN SCHOOL OF SARASOTA, INC.

FAITH CHRISTIAN SCHOOL OF SANASOTA, INC.												
Principal Place	of Business		M	ailing Address					1 10011121 000 11111 10010 10100 11101			
2105 WORRINGTON ST. SARASOTA FL 34231				% H. GREG LEE 2014 FOURTH ST. SARASOTA FL 34223-7								
				ONIDOOTH TE VILLE	•				<ol> <li>Date Incorporated or Qualified 04/30/1990</li> </ol>	3a. Da	te of Last F 02/09/19	995
2. Principal Pla	ce of Busines	ss	2a. Mailing Address 26					4. FEI Number 65-0190773		<b>⊢</b>	pplied For lot Applicable	
Suite, Apt. #	, etc.		Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional Required	
City & State			City & State				Election Campaign Financing     Trust Fund Contribution			May Be to Fees		
Zip 24		Country 25	29	Ζιρ	30	Country			This corporation has liability for in Florida Statutes	ntangible ta		199.032,
24		and Address of Curre		stered Agent					10. Name and Address of New Re	gistered	Agent	
	J10110			<u> </u>		81	1	Vame				
Lee, H. Greg 2014 Fourth Street						82	H	Street Addre	ess (P.O. Box Number is Not Acceptable	e)		
	)TA FL 342					<b>B3</b>	1					
						84	ŀ	City	ation submits this statement for the pur	FL	.   `   `	Code
familiar wit	th, and accer	of the obligations of, Se	Ction 617	.0503, Florida Statut	les.				ation submits this statement for the puri d of directors. I hereby accept the appoint	DATE		
12.		OFFICERS A	ND DIRE	CTORS		13.			ADDITIONS/CHANGES TO OFF			
TITLE	D			DELETE		1.1 TITLE					Change	☐ Addition
NAME	WHITE.					1 2 NAME						
STREET ADDRESS		HELL RD.				1.3 STREET						
CITY-ST-ZiP	SARAS	JIA FL		DELETE		1.4 CITY-5 2.1 TITLE	ST-	ZIP			Change	Addition
TITLE	D HASSE	JAN		Пресене		2 2 NAME						
NAME STREET ADDRESS	4364 P	ASADENA CIRCLE				23 STREE	I AI					
CITY-ST-ZIP	SARAS	DIA FL		DELETE		2.4 CITY- 3.1 TITLE		- Z1P			Change	Addition
TITLE	D	S, JEFFREY K.		Пресси		32 NAME						
NAME STREET ADDRESS		LISS AVENUE				33 STREE		DDRESS				
CITY-ST-ZIP	SARAS				ŀ	34 CITY-						
TITLE				DELETE		4.1 TITLE					☐ Change	Addition
NAME					1	4. 2 NAME	Ε					
STREET ADDRESS						4.3 STREE	ET AI	DDRESS				
CITY-ST-ZIP				[ ] Del Fre		4.4 CITY		- Z1P			Change	Addition
TITLE				DELETE		51 THILE					ondinge	
NAME					ľ	5.2 NAME		500000				
STREET ADDRESS	1					5 3 STREE						
CITY - ST - ZIP	ļ			Pariete		5.4 CITY-		- Z1P			Change	[ ] Addition
TITLE				DELETE		6.1 TITLE		ł			change	
NAME						6 2 NAME						
STREET ADDRESS	1					63 STREI	ET A	ADDRESS				

6 4 CITY - ST - ZIP 14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not aqualify 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 port 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 on the exemption of 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 port 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 on the exemption of 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 port 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 of the exemption of the

SIGNATURE: \_

AN TOED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/96 941-921-7210

CR2E037 (12/95)