

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N37938

1. Entity Name

FAITH CHRISTIAN SCHOOL OF SARASOTA, INC.

FILED

02 OCT 29 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2105 WORRINGTON ST.
SARASOTA FL 34231

2105 WORRINGTON ST.
SARASOTA FL 34231

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA FL

Zip

Country

34236

USA

REINSTATEMENT

4. FEI Number

65-0190773

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCKENRICK, DANIEL J
C/O FAITH CHRISTIAN
2105 WORRINGTON ST
SARASOTA FL 34231

Name

DANIEL J. MCKENRICK

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

4676 HAMLETS GROVE DR.

City

SARASOTA

FL

Zip Code

34235

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

Daniel J. McKerrick

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

(NOTE: Registered Agent signature required when reinstating)

DATE

After September 13, 2002,
min. will be \$236.25.

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
D	MADDOX, BILL	1041 CITRUS AVE	SARASOTA FL 34235	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	MCKENRICK, DAN	4676 HAMLETS GROVE DR	SARASOTA FL 34235	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	PARKER, JIM	890 FAULKWOOD CT	SARASOTA FL 34232	<input checked="" type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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10/29/02--01059--001 **236.25

DP W/S

DIRECTOR
DAVID MANN
1806 WORRINGTON ST.
SARASOTA, FL 34231

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:

Daniel J. McKerrick

7/31/02 (94) 951-2131

CR2E037 (4/02)

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