


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # N37938		
1. Entity Name FAITH CHRISTIAN SCHOOL OF SARASOTA, INC.		
Principal Place of Business 2105 WORRINGTON ST. SARASOTA, FL 34231	Mailing Address 1266 FIRST ST SUITE 9 SARASOTA, FL 34236	
DO NOT WRITE IN THIS SPACE		
		04132005 No Chg-NP CR2E037 (10/03)
4. FEI Number 65-0190773		Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent MCKENRICK, DANIEL J 4676 HAMLETS GROVE DR SARASOTA, FL 34235		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
		U000000315076 04/19/05-80020-014 70.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MADDOX, BILL 1041 CITRUS AVE SARASOTA, FL 34235	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MCKENRICK, DAN 4676 HAMLETS GROVE DR SARASOTA, FL 34235	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MANN, DAVID 1806 WORRINGTON ST SARASOTA, FL 34231	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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: <i>William E. Maddox</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/13/05 941/555-7358 <small>Date Phone #</small>