

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41565

FILED
Jan 20, 2009
Secretary of State

Entity Name: SONRISE COMMUNITY CHURCH, INC.

Current Principal Place of Business:

7632 MASSACHUSETTS AVE
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

Current Mailing Address:

10154 SOUTHWOOD CT
NEW PORT RICHEY, FL 34654 US

New Mailing Address:

FEI Number: 59-3054775 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BABCOCK, ALLAN
10154 SOUTHWOOD COURT
NEW PORT RICHEY, FL 34654 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BABCOCK, ALLAN,
Address: 10154 SOUTHWOOD CT
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: D () Delete
Name: DAVIS, MIKE
Address: 5707 DOVE CT.
City-St-Zip: NEW PORT RICHEY, FL 34652 US

Title: D () Delete
Name: CLARK, CHAD
Address: 10106 DOE CT
City-St-Zip: NEW PORT RICHEY, FL US

Title: D () Delete
Name: BABCOCK, MICHAEL
Address: 7149 RED OAK LOOP
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: D () Delete
Name: ZACCONE, JERRY
Address: 12036 TASHA CT.
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: D () Delete
Name: LIST, FLOYD
Address: 7930 CALLAN CT.
City-St-Zip: NEW PORT RICHEY, FL 34654 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL BABCOCK

D

01/20/2009

Electronic Signature of Signing Officer or Director

Date