## FILED Mar 09, 2006 8:00 am Secretary of State

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	ANNUAL REPORT	

03-09-2006 90156 007 \*\*\*\*61 25 **DOCUMENT # N50695** MANASOTA CHRISTIAN CHAPEL, INC. Principal Place of Business Mailing Address 1450 46TH AVE DR W 1450 46TH AVE DR W BRADENTON, FL 34207 BRADENTON, FL 34207 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01172006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Number 65-0360318 Applied For Not Applicable Country Country \$8.75-Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRADLEY, MILTON Street Address (P.O. Box Number is Not Acceptable) 2103 IVY PLACE SARASOTA, FL 34235 4241 Day Bridge Place Zip Code 3 4 2 2 2 (address change only) Ellenton 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete DTLE X Change ☐ Addition BRADLEY, MILTON NAME NAME 4241 Day Bridge Place STREET ADDRESS 2103-IVY PLACE STREET ADDRESS SARASOTA, FL 34235 CITY-ST-ZIP CITY-SY-ZIP Ellenton, FL 34222 TATLE ☐ Delete TITLE Change ☐ Addition PENNINGTON, GREG NAME NAME 7703 18th AVe NW STREET ADDRESS 1910 15TH AVE DR. W. STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34205 CITY-ST-ZIP Bradenton, FL 34209 TITLE ☐ Delete TITLE Change ☐ Addition NAME MAURER, DOUG NAME 110 50th Ave Dr E STREET ADDRESS 917 35TH AVE. DR. E. STREET ADORESS CITY-ST-ZIP BRADENTON, FL 34208 CITY-ST-ZIP Bradenton, FL 34203 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-78P ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Milton\_