

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000000382 (2)

1. Corporation Name

COMMUNITY BIBLE CHURCH OF SARASOTA FLORIDA, INC.



Principal Place of Business

1959 MARTIN LUTHER KING
SARASOTA FL 34234
US

Mailing Address

2155 N ORANGE AVE
SARASOTA FL 34234
US

3. Date Incorporated or Qualified
01/28/1993

3a. Date of Last Report
08/02/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0380077

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUTLER, REV ROSA
2155 N ORANGE AVE
SARASOTA FL 34234

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME THOMAS, WADE REV
STREET ADDRESS P.O. BOX 2171
CITY-ST-ZIP SARASOTA FL 34230

1.1 TITLE President ☐ Change ☒ Addition
1.2 NAME Elouise Hannans
1.3 STREET ADDRESS 1585 22nd Street
1.4 CITY-ST-ZIP Sarasota, FL 34234 ☐ Change ☐ Addition

TITLE D ☐ DELETE
NAME BUTLER, ROSA REV
STREET ADDRESS 2155 N. ORANGE AVE.
CITY-ST-ZIP SARASOTA FL 34234

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME REESE, EFFIE
STREET ADDRESS 1351 16TH STREET
CITY-ST-ZIP SARASOTA FL 34236

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Effie M. Reese / Effie M. Reese
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/96 941-954-7506
Date Daytime Phone #
3-4-96

CR2E037 (12/95)