2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2009
Secretary of State

DOCUMENT# N93000005154

Entity Name: VENICE COMMUNITY CHURCH OF THE BRETHREN, INC.

Current Principal Place of Business:

233 TAMIAMI TRAIL SOUTH
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

233 TAMIAMI TRAIL SOUTH
VENICE, FL 34285

New Mailing Address:

FEI Number: 59-2369553 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTIN, ALICE
1662 QUAIL LAKE DRIVE
VENICE, FL 34293 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:	BC	( ) Delete
Name:	HAWKINS, ROBERT	
Address:	303 SUNSET LAKE BLVD	
City-St-Zip:	VENICE, FL 342924525 US	
Title:	DS	( ) Delete
Name:	KIPP, LINDA MRS	
Address:	555 THE ESLANADE NO 604	
City-St-Zip:	VENICE, FL 34285 US	
Title:	DT	( ) Delete
Name:	MARTIN, ALICE L	
Address:	1662 QUAIL LAKE DRIVE	
City-St-Zip:	VENICE, FL 34293	
Title:	D	( ) Delete
Name:	GRAYBILL, ALICE	
Address:	4806 CAPRI AVENUE	
City-St-Zip:	SARASOTA, FL 34235	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: ALLICE LONG MARTIN D-TR 02/01/2009

Electronic Signature of Signing Officer or Director — Date