2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N94000003569

1. Entity Name
SONCOAST COMMUNITY CHURCH OF BOCA RATON,



FILED Apr 02, 2007 8:00 am Secretary of State 04-02-2007 90057 021 ****61.25

D: : ID: 10
Principal Place of Business
7500 F COUNTRY CLUB REVO
/ THE PERSON AND THE PROPERTY OF THE

Mailing Address

7500 E COUNTRY CLUB BLVD

BOCA RATON, FL 33487 US BOCA RATON, FL 33487 US													
2. Principal P	lace of Busines	s - No P.O. Box #	3. Mailing	Address		· ·							### BY ###
Suite, Apt. #, etc.			Suite,	Suite, Apt. #, etc.				03122007	Chg-NP	C	CR2E03	7 (12/06)	
City & State			City &	City & State				I. FEI Numbe 65-050	 ≆r 7128			<u> </u>	oplied For
Zip Country Zip				Cou	ntry 5 Certificate of Status Desired \$8.75				\$8.75 Add	litional			
	6. Name an	d Address of Curren	nt Registered A	Agent	I			. Name and	Address of N	lew Regi		,	
COMEN	CUDICTO	01150				Name	TA DDIEN	DAUTE					
). CHRISTO RWOOD BL'							DAVID D. Box Number	er is Not Accer	otable)			
	BEACH, FL							WINTON		J		 	
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						City DEI	LRAY B	EACH			FL	Zip Cod 3344	3
8. The above	named entity si	ubmits this statement	for the purpose	of changing its r	egistere				th, in the State	of Florida	a. I am f		
the obligati	ions of registere	ed agent.											
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SIGNATURE .		mited mame of registered agen	nt and title if applical				he undrived Mu	en reinstating)		7 307 2	DATE		
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	Filling Fee i			9. Election Camp Trust Fund Co			□ \$	5.00 May B ided to Fees	le			payable to ment of St	
10.		OFFICERS AND D	IRECTORS		11.		AD	DITIONS/CH/	ANGES TO OF	FICERS.	AND DIF	ECTORS IN	10
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NAME Street address	ŧ.	CHRISTOPHER WOOD BLVD			NAME	E Et adoress	DAVID	HARDEN	Ī				
	02120112111	ACCD DEAD			E SINK							** ***	П 33444
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I hereby certify that the information supplied with this filling 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.

SI	G	N.	Δ٦	П	15	RE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID HARDEN

3/30/2007