

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000580

FILED
Mar 30, 2004
Secretary of State

Entity Name: GIFTS FROM GOD OF SARASOTA, INC.

Current Principal Place of Business:

P.O. BOX 1300
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1300
OSPREY, FL 34229

New Mailing Address:

FEI Number: 65-0742520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTTERFIELD, MICHAEL
369 DOLPHIN SHORES CIR.
NOKOMIS, FL 34275 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: VP () Delete
Name: RIPO, GERALD
Address: 1234 LIME AVE
City-St-Zip: SARASOTA, FL 34237

Title: TD () Delete
Name: KEITH, LLOYD
Address: 320 BAY VISTA AVE
City-St-Zip: OSPREY, FL 34229

Title: PD () Delete
Name: SMITH, TED
Address: 3110 BISPHAM RD
City-St-Zip: SARASOTA, FL 34231

Title: ED () Delete
Name: BUTTERFIELD, MICHAEL
Address: 369 DOLPHIN SHORES CIR
City-St-Zip: NOKOMIS, FL 34275

Title: S () Delete
Name: KOVACH, SUSAN
Address: 7920 UMBRELLA PINE WAY
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: RIPO, GERALD
Address: 1234 LIME AVE
City-St-Zip: SARASOTA, FL 34237

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

Title: COBD (X) Change () Addition
Name: SMITH, TED
Address: 3110 BISPHAM RD
City-St-Zip: SARASOTA, FL 34231

Title: PCEO (X) Change () Addition
Name: BUTTERFIELD, MICHAEL
Address: 369 DOLPHIN SHORES CIR
City-St-Zip: NOKOMIS, FL 34275

Title: SD (X) Change () Addition
Name: KOVACH, SUSAN
Address: 7920 UMBRELLA PINE WAY
City-St-Zip: SARASOTA, FL 34241

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 BUTTERFIELD

PCEO

03/30/2004

Electronic Signature of Signing Officer or Director

Date