

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003218

FILED  
Jan 20, 2008  
Secretary of State

Entity Name: SANCTUARY MISSION, INC.

**Current Principal Place of Business:**

7463 W GROVER CLEVELAND BLVD  
HOMOSASSA, FL 34446

**New Principal Place of Business:**

**Current Mailing Address:**

7463 W GROVER CLEVELAND BLVD  
HOMOSASSA, FL 34446

**New Mailing Address:**

FEI Number: 59-3447051

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

GENZ, VICTORIA M  
4404 SE 6TH WAY  
BUSHNELL, FL 33513 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: PD ( ) Delete  
Name: GENZ, VICTORIA  
Address: 4404 SE 6TH WAY  
City-St-Zip: BUSHNELL, FL 33513

Title: VD ( ) Delete  
Name: GOLDSTEIN, BYRON  
Address: 3909 SOUTH SWAN TERRACE  
City-St-Zip: HOMOSASSA, FL 34448

Title: D ( ) Delete  
Name: AWE, MICHAEL  
Address: 1840 W NOBLE STREET  
City-St-Zip: LECANTO, FL 34461

Title: D ( ) Delete  
Name: SIPES, JOHN  
Address: P.O BOX 988  
City-St-Zip: CRYSTAL RIVER, FL 34423

Title: D ( ) Delete  
Name: KOERNER, SUZANNE  
Address: 118 N.E. 2ND STREET  
City-St-Zip: CRYSTAL RIVER, FL 34429

Title: T ( ) Delete  
Name: TREMBLY, BARBARA  
Address: 13275 KITTY RD  
City-St-Zip: BROOKSVILLE, FL 34614

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GENZ, PAUL  
Address: 4404 SE 6TH WAY  
City-St-Zip: BUSHNELL, FL 33513

Title: EVP (X) Change ( ) Addition  
Name: GOLDSTEIN, BYRON J  
Address: 3909 SOUTH SWAN TERRACE  
City-St-Zip: HOMOSASSA, FL 34448

Title: S (X) Change ( ) Addition  
Name: HOLCOMB, DONALD  
Address: 2534 E STEVEN STREET  
City-St-Zip: INVERNESS, FL 34453

Title: D (X) Change ( ) Addition  
Name: SIPES, JOHN  
Address: 2458 NE 47TH STREET  
City-St-Zip: OCALA, FL 34479

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: BYRON J GOLDSTEIN

EVP

01/20/2008

Electronic Signature of Signing Officer or Director

Date