

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000003218

**FILED**  
**Apr 28, 2011**  
**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  
**Name:** GENZ, PAUL  
**Address:** 4404 SE 6TH WAY  
**City-St-Zip:** BUSHNELL, FL 33513

**Title:** S  
**Name:** HOLCOMB, DONALD  
**Address:** 2534 E STEVEN STREET  
**City-St-Zip:** INVERNESS, FL 34453

**Title:** D  
**Name:** SIPES, JOHN  
**Address:** 2458 NE 47TH STREET  
**City-St-Zip:** OCALA, FL 34479

**Title:** T  
**Name:** TREMBLAY, BARBARA  
**Address:** 13275 KITTY RD  
**City-St-Zip:** BROOKSVILLE, FL 34614

I hereby 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 all other like empowered.

**SIGNATURE:** BARBARA TREMBLAY

T

04/28/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date