

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004898

FILED  
May 15, 2008  
Secretary of State

**Entity Name:** GRACE COVENANT CHURCH OF SARASOTA, INC.

**Current Principal Place of Business:**

601 HONORE AVE  
SARASOTA, FL 34232

**New Principal Place of Business:**

**Current Mailing Address:**

5318 COLONY MEADOWS LANE  
SARASOTA, FL 34233

**New Mailing Address:**

**FEI Number:** 65-0943142      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ICARD, MERRILL, CULLIS, TIMM, FUREN ET AL  
2033 MAIN ST, SUITE 600  
SARASOTA, FL 34237 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: SPRIGGS, ROBERT  
Address: 8427 BRANDEIS CIR. EAST  
City-St-Zip: SARASOTA, FL 34243

Title: VPD ( ) Delete  
Name: ZELLNER, GREG  
Address: 5674 FORESTER LAKE DRIVE  
City-St-Zip: SARASOTA, FL 34243

Title: SD ( ) Delete  
Name: YAX, CATHY  
Address: 5275 CAMUS  
City-St-Zip: SARASOTA, FL 34232

Title: TD (X) Delete  
Name: LANGER, CINDY  
Address: 3632 WINDERWOOD DRIVE  
City-St-Zip: SARASOTA, FL 34232

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

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

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

Title: TD (X) Change ( ) Addition  
Name: YAX, CATHY  
Address: 5275 CAMUS  
City-St-Zip: SARASOTA, FL 34232

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: CATHY YAX

TD

05/15/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date