

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703408

FILED
Apr 17, 2006
Secretary of State

Entity Name: HUMANE SOCIETY OF SARASOTA COUNTY, INC.

Current Principal Place of Business:

2331 15TH STREET
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

2331 15TH STREET
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 59-6014943 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLMAN, DEBORAH R
671 DIXON RD
VENICE, FL 34292 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: DELPECH, MELINDA P.A.
Address: 46 N WASHINGTON BLVD
City-St-Zip: SARASOTA, FL 34236

Title: SD () Delete
Name: ELLIS, CATHERINE G
Address: 528 SIESTA DRIVE
City-St-Zip: SARASOTA, FL 34242

Title: VD () Delete
Name: DENKIN, DENKIN
Address: P.O. BOX 48927
City-St-Zip: SARASOTA, FL 34230

Title: TD () Delete
Name: WINTER, NEIL
Address: 6514 SUNDEW CT
City-St-Zip: BRADENTON, FL 34202

Title: SD () Delete
Name: OPPENHEIMER, JAN
Address: 2223 53RD STREET
City-St-Zip: SARASOTA, FL 34234

Title: ED () Delete
Name: MILLMAN, DEBORAH R
Address: 671 DIXON RD
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: SMITH, JODIE
Address: 7892 BERGAMO AVE
City-St-Zip: SARASOTA, FL 34238

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

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

Title: SD (X) Change () Addition
Name: BEILEY, ELIZABETH
Address: 712 SEARCY AVE
City-St-Zip: SARASOTA, FL 34237

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DEBORAH L BERK

SM

04/17/2006

Electronic Signature of Signing Officer or Director

_____ Date