

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 728129 (8)

1. Corporation Name

GIRLS INCORPORATED OF SARASOTA COUNTY



Principal Place of Business

Mailing Address

201 SOUTH TUTTLE AVE
SARASOTA FL 34237

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SARASOTA FL 34237

3. Date Incorporated or Qualified
11/27/1973

3a. Date of Last Report
02/17/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
23-7363275

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired \$8.75 Additional Fee Required

City & State

City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23

28

Zip

Country

Zip

Country

24

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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WATTS, SHERRY
1622 PEREGRINE POINT DRIVE
SARASOTA FL 34231

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
NAME COON, NATHAN R
STREET ADDRESS 1605 MAIN ST
CITY-ST-ZIP SARASOTA FL 34236

1.1 TITLE D/V Change Addition
1.2 NAME Kim Ogilvie
1.3 STREET ADDRESS 1801 Main Street
1.4 CITY-ST-ZIP Sarasota, FL 34236

TITLE D DELETE
NAME CUNNINGHAM, KAREN
STREET ADDRESS 420 BEACH RD 703
CITY-ST-ZIP SARASOTA FL 34214-2

2.1 TITLE D/T Change Addition
2.2 NAME Kennard R. Honick
2.3 STREET ADDRESS 1800 Second St., Ste. 975
2.4 CITY-ST-ZIP Sarasota, FL 34236

TITLE D DELETE
NAME FISL, WENDY
STREET ADDRESS 1515 RINGLING BLVD
CITY-ST-ZIP SARASOTA FL

3.1 TITLE D/V Change Addition
3.2 NAME Fisk Wendy
3.3 STREET ADDRESS 1515 Ringling Blvd.
3.4 CITY-ST-ZIP Sarasota, FL 34236

TITLE DP DELETE
NAME HARSHMAN, JOHN
STREET ADDRESS 2535 MULBERRY TER.
CITY-ST-ZIP SARASOTA FL 34231

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D DELETE
NAME STEGALL, BRENDA
STREET ADDRESS 1015 CALOOSA DR
CITY-ST-ZIP SARASOTA FL 34236

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Brendak Stegall (Brendak Stegall)

1/24/96

941-366-6646

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)