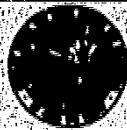


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 19 AM 8:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 754035 (4)

1. Corporation Name

WIDOWED PERSONS SERVICE OF SOUTH SARASOTA COUNTY
INC.

Principal Place of Business

930 S. TAMMAM TRAIL
VENICE FL 34285-0231

Mailing Address

930 S. TAMMAM TRAIL
VENICE FL 34285-0231

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/03/1980

3a. Date of Last Report

04/19/1994

4. FEI Number

59-2025097

Applied For

Not Applicable

5. Certificate of Status Desired

\$5.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

\$68.75 Supplemental
Fee Not Required

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

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

Country

31

9. Name and Address of Current Registered Agent

BARRIBALL, PAUL
201 CENTER ROAD
P. O. BOX 1740
VENICE FL 34292

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, 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

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
D	EDMONDSON, JOHN	200 VENICE AVE EAST VENICE FL	
D	REITZ, CLAIRE	300 E THREE LAKES LANE VENICE FL	34293
SO	BELL, JEANNETTE	285 NOKOMIS AVENUE S. VENICE FL	34285
TD	EDDY, MARY	912 CHURCH STREET VENICE FL	34285
D	GARDNER, MARIAN S	87 SUNRISE DR ENGLEWOOD FL	34223
PO	BARRIBALL, PAUL	201 CENTER RD VENICE FL	34292

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
D	Jodi Michalski	744 White Pine Tree Road Venice, FL	34292
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
6.1 TITLE	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: Mary Eddy
Mary Eddy - Treasurer & Director

April 14
March 23

1995 (813) 488-4602