FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Principal Place of Busine
201 S. TUTTLE AVENUE
P. O. DRAWER 4195
SARASOTA FL 34237

FILED Mar 05, 1999 8:00 am § Secretary of State 03-05-1999 90109 008 ****61.25

OCUN Corporation	MENT # 769013										
THE FOUNDATION OF GIRLS INCORPORATED OF SARASOTO COUNTY							1/62/1 - 90109 - 8				
rincipal Place of Business Mailing Address							20 to 10 to				
oi S. Tuttle O. Drawer Arasota Fl	AVENUE 4195	201 S. TUTTLE AVENUE P. O. DRAWER 4195 SARASOTA FL 34237									
Principal Pl	ace of Business	2a. Mailing Address 26					3. Date Incorporated or Qualifed 06/20/1983				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					4. FEI Number 59-2429232			Applicable	
City & State	-	City & State					5. Certificate of Status Desired.	اعتقالت	\$8.75 A		
Zip	Country 25	Zip	Zip Country			6. Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees		
	9. Name and Address of Current	Registered Agent		Ľ,			10. Name and Address of New Regis	tered A	Agent		
				81	Name						
BERTEAU, JOHN				82 Street Address (P.O. Box Number is Not Acceptable)							
1500 RINGLING BLVD				83							
SARASOTA FL 33577								85 Zip C	ada.		
·					FL						
office or n	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	if Florida. Such change was a	utnonzer	ΙVGΕ	named on the corporate	corpor eration	ration submits this statement for the pur i's board of directors. I hereby accept the	ose of o	changing its i itment as reg	registered jistered	
IGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	Registered	l Agent	signature re	quired v		ATE			
2.	OFFICERS AND			13.			ADDITIONS/CHANGES TO OFFICE	RS AN	~~		
TLE	S □ DELETE		1.1 TITLE				()			☐ Addition	
ME.	FARHART, MATTHEW		12 N	12 NAME MG		Mat	thew Farhat				
REET ADDRESS	1800 2ND ST., #808-27		1.3 S	1.3 STREET ADDRESS						l l	
TY-ST-ZIP	SARASOTA FL 34236			1.4 CITY-ST-ZIP		С			Change	Addition	
rle	D						melia "Candy" Swick		C. Ondrigo		
AME	LEETZOW, LEONARD			2.2 NAME 50 2.3 STREET ADDRESS			rnelia "Candy" Swick John Ringling Blvd.			. }	
REET ADDRESS	2 N. TAMIAMI TRAIL #1100			2.4 City-St-Zip St		Saı	rasota, FL 34236				
TY-ST-ZIP TLE	SARASOTA FL			3.1 TITLE					Change	Addition	
AME	CLARKE, ROBERT P			3.2 NAME			•			ŀ	
REET ADDRESS		- · · - ·		3.3 STREET ADDRESS			-		,		
TY-ST-ZIP	ARSOTA FL			3.4. CITY-ST-ZIP							
TLE .	D	☐ DELETE	4.1 T	TLE					Change	☐ Addition	
AME	BADER, PEGGY			4. 2 NAME						1	
REET ADDRESS	1819 MAIN ST, STE 1204 BANK/AMERICA			4.3 STREET ADDRESS						İ	
TY-ST-ZIP	SARASOTA FL	Ø DELETE	5.1 TI	ЛY∙\$₹	-ZIP				Change	Addition	
TLE	C Darnell, Robert W	_		AME							
AME TREET ADDRESS					ADDRESS		,			Ì	
TY-ST-ZIP	SARASOTA FL		5.4 C	ITY-ST	-ZIP					{	
TLE	D	☐ DELETE	6.1 T	ΠE					☐ Change	Addition	
AME	BAILEY, KENNETH		6.2 N	AME						,	
TREET ADDRESS	1549 RINGLING BLVD, ENTERPI	RISE NATL BANK	6.3 S	TREET	ADDRESS						
TY-ST-ZIP	SARASOTA FL		6.4 C	πγ-sτ	-ZIP						

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

SIGNATURE SIGNATURE NAME OF PRINTED NAME OF FIGNING OFFICER OR DIRECTOR

Date

941-365-4617