

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 07, 2008
Secretary of State**

DOCUMENT# 769013

Entity Name: THE FOUNDATION OF GIRLS INCORPORATED OF SARASOTA COUNTY

Current Principal Place of Business:

201 S. TUTTLE AVENUE
P. O. DRAWER 4195
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

201 S. TUTTLE AVENUE
P. O. DRAWER 4195
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 59-2429232 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

JOHN J. SHEA, P.A.
269 SOUTH OSPREY AVENUE, SUITE 100
SARASOTA, FL 34236 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: CHR () Delete
Name: SHEA, JOHN J
Address: 269 SOUTH OSPREY AVENUE, SUITE 100
City-St-Zip: SARASOTA, FL 34236

Title: VCHR () Delete
Name: NADEL, ART
Address: 201 S. TUTTLE AVENUE
City-St-Zip: SARASOTA, FL 34247

Title: SECT () Delete
Name: FRANCOLETTI, KATHY
Address: 201 S. TUTTLE AVENUE
City-St-Zip: SARASOTA, FL 34237

Title: TRS () Delete
Name: BOWEN, WENDY
Address: 201 S. TUTTLE AVENUE
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: JOHN J. SHEA

Electronic Signature of Signing Officer or Director

CHR

02/07/2008

Date