2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#769013

FILED Jun 23, 2003 Secretary of State

Entity Name: THE FOUNDATION OF GIRLS INCORPORATED OF SARASOTO COUNTY

Current Principal Place of Business:				New Principal Place of Business:			
P. O. DRA	TTLE AVENU WER 4195 A, FL 34237	E					
Current Mailing Address:				New Mailing Address:			
P. O. DRA	TTLE AVENU WER 4195 A, FL 34237	E					
FEI Number	: 59-2429232	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:		Name and	Address o	of New Registered Agent:	
WAILAU, JAIME 1800 SECOND STREET, SUITE 880 SARASOTA, FL 34236 US				WALLACE, JAIME 1800 SECOND STREET, SUITE 880 SARASOTA, FL 34236 US			
	named entity e of Florida.	submits this statement for the p	urpose o	f changing it	ts registere	d office or registered agent, or both,	,
SIGNATU	RE: JAIME V	VALLACE				06/23/2003	
	Electro	nic Signature of Registered Age	nt			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	WALLACE, JA	ENUE STE 880		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (WATTS, SHEF 4401 MIDNIGH SARSOTA, FL	HT PARK RD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (THURAN, ROE 1819 MAIN ST SARASOTA, F	REET		Title: Name: Address: City-St-Zip:	D THURAU, R 1819 MAIN SARASOTA	STREET	
Title: Name: Address: City-St-Zip:	BOWMAN, AL	O STREET, SUITE 971		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D (CUNNINGHAM 1515 EINGLIN SARASOTA, F	IG BLVD		Title: Name: Address: City-St-Zip:	D CUNNINGH, 1515 RINGI SARASOTA		
Title: Name: Address: City-St-Zip:	D (ROSSI, CONN 1858 RINGLIN SARASOTA, F	IG BLVD		Title: Name: Address: City-St-Zip:		() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT THURAU D 06/23/2003