2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006
Secretary of State

DOCUMENT# N05000002630

Entity Name: THE SARASOTA/BRADENTON CHAPTER OF THE NATIONAL ASSOCIATION OF RESIDENTIAL PROPERTY MANAGERS, INC.

Current Principal Place of Business:

3234 S TAMIAMI TRAIL
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

3234 S TAMIAMI TRAIL
SARASOTA, FL 34239

New Mailing Address:

FEI Number: 57-1223548 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HEIST, H ANTHONY
1661 ESTERO BLVD SUITE 20
FT MYERS BEACH, FL 33931 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: D ( ) Delete
Name: CORBRIDGE, R SCOTT
Address: 3234 S TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34239

Title: D ( ) Delete
Name: DAVIS, CHANTAL
Address: 5971 CATTLERIDGE BLVD #202
City-St-Zip: SARASOTA, FL 34232

Title: D ( ) Delete
Name: ROYAL, JULIE
Address: 5402 MARINA DR
City-St-Zip: HOLMES BEACH, FL 34237

Title: D ( ) Delete
Name: MAYO, BARBARA
Address: 4303 1ST E SUITE 300
City-St-Zip: BRADENTON, FL 34208

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 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: ROBERT S CORBRIDGE D 04/27/2006

Electronic Signature of Signing Officer or Director — Date