## AMENDED NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

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08-2	3-2004	90021-008-***	**70:00
	141	N07975	

DOCUMENT # N07975  1. Entity Name	FILED								
SARASOTA ALLIANCE FOR HISTORIC PRESERVATION,					4 AUG 27	AM 10: 1	19		
DO NOT WRITE IN THIS SPACE					SECRETARY OF STATE TALL <b>24.0809.414</b> .ORIDA				
2. Principal Place of Business		1							
P.O. Box 1754 P.O. Box 17			·	┧					
Suite, Apt. #. etc.		DO NOT WRITE IN THIS SPACE							
City & State City & State				4. FEI Number Applied For					
Sarasota F1 Sarasota F1				59-2551426 Not Applicable					
Zip Country 34230 Sarasota	<sup>Zip</sup> 34230	Country Sarasota		5. Certificate of Status Desired					
				7. Name and Add	ress of Current	Registered Age	ent		
and the same of th	Name Joy	Joyce Waterbury							
DO NOT W	RITE		Street Address	ess (P.O. Box Number is Not Acceptable)					
•		4316 Marcott Circle							
IN THIS SPACE									
			City	asota		FL	Zip Code 34233		
8. The above named entity submits this statement for	the purpose of changing its	register		•	in the state of Flo	rida.			
Level Waterley	oyce Waterbu	~ * * *	Sograta	****	Augus	+ 10	2004		
SIGNATURE Specific typed or protect review of registered approximately	and title if applicable. (NOTE	Rogister	d Agent signature require	d whon roinstating)	Augus	DATE			
1	1								
FEE IS \$61.25 9. Election Campaig Initial or Amended UBR Trust Fund Contri				\$5.00 May Be Added to Fees	_	ke Check Pa epartment o	Ţ		
į, <b>v</b> :					<u> </u>				
	10. F OFFICERS AND DIRECTORS					<del></del>			
NAME PD		TITE	I				5		
pavio Jennings			ET ADORESS						
GIV-sf-ze <sup>2</sup> 3436 Woodland Dr. Sarasota FL 34242			-ST-ZIP				1500		
TITLE , VD		TITL							
STREET ADDRESS Debra Flynt-Ga	rrett	NAA STR	EET AODRESS						
CITY-ST-JIP 2189 Hillview Sarasota Ft 34	St		r-ST-ZIP				ļ		
TOTAL VDT	400	TITE	E						
MALAF	AV	NAA	i i			_			
STREET ADDRESS LORrie Muldowney 2709 Temple St.			EET ADDRESS 1-ST-ZIP						
Sarasota FL 34239			E						
NAME SD	i ch		Æ	IN THIS SPACE					
			EET ADDRESS				}		
1910 1101000 011020			r-ST-ZIP						
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*****			EET ADDRESS	DORESS					
CITY-ST-ZIP			/-ST-ZIP	TIP KICHILL					
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			r-ST-ZIP						
12. Thereby 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 report or supplemental report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am an efficer 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 10 or on an									
attachment with an address, with all other like empowered.									
SIGNATURE: JOUCE Waterbury, Secretary August 19,2004  Delic Designation Promise Promis									