

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07975

FILED
Apr 21, 2009
Secretary of State

Entity Name: SARASOTA ALLIANCE FOR HISTORIC PRESERVATION, INC.

Current Principal Place of Business:

1750 BEN FRANKLIN
#9G
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1754
SARASOTA, FL 34230

New Mailing Address:

FEI Number: 59-2551426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATERBURY, JOYCE
1750 BEN FRANKLIN DR. #9G
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: PD () Delete
Name: SMALLY, DON
Address: 266 CHARTLEY CT. N
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: WHITE, JESSE
Address: 1093 CENTRAL AVE.
City-St-Zip: SARASOTA, FL 34236

Title: TD () Delete
Name: WATERBURY, JOYCE
Address: 1750 BEN FRANKLIN DR. #9G
City-St-Zip: SARASOTA, FL 34236

Title: SD () Delete
Name: HORTON, MARTHA
Address: 605 HARBOR SHORE DR.
City-St-Zip: NOKOMIS, FL 34275

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: BOWERS, JOAN
Address: 1660 7TH ST.
City-St-Zip: SARASOTA, FL 34236

Title: TD (X) Change () Addition
Name: WHITE, JESSE
Address: 1063 CENTRAL AVE.
City-St-Zip: SARASOTA, FL 34236

Title: VD (X) Change () Addition
Name: HORTON, MARTHA
Address: 605 HARBOR SHORE DR.
City-St-Zip: NOKOMIS, FL 34275

Title: SD () Change (X) Addition
Name: BENZ, KAFI
Address: PO BOX 1669
City-St-Zip: TALLEVAST, FL 34270

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: DON SMALLY

PD

04/21/2009

Electronic Signature of Signing Officer or Director

Date