FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N14324 (0)

1. Corporation Name
FOUNDERS CIRCLE OF SARASOTA, INC.

Principal Place of Business	Mailing Address
1351 N. LAKESHORE DR. SARASOTA FL 34231 US	1351 N. LAKESHORE DR. SARASOTA FL 34231 US

3. Date Incorporated or Qualified: 04/10/1986
3a. Date of Last Report: 02/17/1995

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: 59-2719585 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SAVARY, JOHNSON S.
1671 S. DR.
SARASOTA FL 34239

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD LA FOLLETTE, ALICE 4887 WINDSOR PK SARASOTA FL ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD 34235 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FEATHERMAN, SUSAN 5122 KESTRAL PARKWAY SO. SARASOTA FL ☒ DELETE	2.1 TITLE SD / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	SUE TOWLER 7306 POINT of ROCKS Rd. SARASOTA, FLORIDA 34242 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD CORKENER, LAURA 4708 OCEAN BLVD SARASOTA FL ☒ DELETE	3.1 TITLE VPD / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	NANCY STEVENSON 4849 Kestral Pkwy., N Sarasota, Florida 34231 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RSD BRYANT, MILLIE 1329 N LAKE SHORE DR SARASOTA FL ☒ DELETE	4.1 TITLE RSD / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	FLUFF THAYER 1808 Carry Key Rd. Nokomis, Florida 34275 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BAGLEY, SARA 1435 CEDAR BAY LANE SARASOTA FL ☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	VPD 34231 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HOEFER, KAREN 1351 N. LAKE SHORE DR. SARASOTA FL ☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	KAREN HOEFER GRIFFITH 34231 ☒ Change ☒ Addition

CR2E037 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Karen Hoefer Griffith 3/9/96 941-921-6151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
KAREN HOEFER GRIFFITH