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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N16722**

1. Corporation Name

ROTARY CLUB OF SARASOTA SUNRISE FOUNDATION, INC.

Principal Place of Business	Mailing Address
P.O. BOX 595 SARASTOA FL 34230 US	P.O. BOX 595 SARASTOA FL 34230 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 4055 Bee Ridge Rd	26 c/o Helen Ledgerwood	09/10/1986
Suite, Apt. #, etc. 22 c/o Helen Ledgerwood	Suite, Apt. #, etc. 27 4055 Bee Ridge Rd	4. FEI Number 59-2307445 ☐ Applied For ☐ Not Applicable
City & State 23 Sarasota, FL	City & State 28 Sarasota, FL	5. Certifcate of Status Desired ☐ $8.75 Additional Fee Required
Zip 24 34233 Country 25 USA	Zip 29 34233 Country 30 USA	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

BLASER, JOHN A
1315 QUAIL DR
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name: Ledgerwood, Helen B
82 Street Address (P.O. Box Number is Not Acceptable)
83: 4055 Bee Ridge Rd
84 City: Sarasota FL 85 Zip Code: 34233

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: Helen B. Ledgerwood DATE: 1/29/99
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	PD	☐ DELETE	1.1 TITLE D	☒ Change ☐ Addition President
NAME	BLASER, JOHN A		1.2 NAME	H Ledgerwood, Helen B
STREET ADDRESS	1315 QUAIL DR		1.3 STREET ADDRESS	4055 Bee Ridge Rd.
CITY-ST-ZIP	SARASOTA FL 34231		1.4 CITY-ST-ZIP	Sarasota, FL 34233
TITLE	VD	☐ DELETE	2.1 TITLE	~~Vice President~~ ~~Change~~ ☐ Addition
NAME	EVANS, MARTIN L		2.2 NAME	
STREET ADDRESS	3930 SPYGLASS HILL RD		2.3 STREET ADDRESS	
CITY-ST-ZIP	SARASOTA FL 34238		2.4 CITY-ST-ZIP	
TITLE	SD	☐ DELETE	3.1 TITLE	☒ Change ☐ Addition Secretary
NAME	POTVIN, JOHN P		3.2 NAME D	Blaser, John A
STREET ADDRESS	2211 ORIOLE DR.		3.3 STREET ADDRESS	1315 Quail Dr
CITY-ST-ZIP	SARASOTA FL 34239		3.4 CITY-ST-ZIP	Sarasota FL 34231
TITLE	TD	☐ DELETE	4.1 TITLE	☒ Change ☐ Addition Treasurer
NAME	LEDGERWOOD, HELEN		4.2 NAME D	Hugh Cannon
STREET ADDRESS	2207 89TH ST. N.W.		4.3 STREET ADDRESS	7758 Silver Bell Dr.
CITY-ST-ZIP	BRADENTON FL 34209		4.4 CITY-ST-ZIP	Sarasota, FL 34241
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E037 (11/98)

14. I hereby 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 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, with all other like empowered.

SIGNATURE: Helen B. Ledgerwood 1/29/99 (941) 371-7808
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Helen B. Ledgerwood