

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N16722

1. Entity Name

ROTARY CLUB OF SARASOTA SUNRISE FOUNDATION, INC.

Principal Place of Business

P.O. BOX 595
SARASOTA FL 34230
US

Mailing Address

P.O. BOX 595
SARASOTA FL 34230
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2307445

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLASER, JOHN A
1315 QUAIL DR.
SARASOTA FL 34231

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEDGERWOOD, HELEN B 4055 BEE RIDGE RD SARASOTA FL 34233	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BAGOR, FRANK 1519 CLOWER CREEK DR. SARASOTA FL 34231	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BLASER, JOHN A 1315 QUAIL DR SARASOTA FL 34231	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD OLSEN, GENE 5421 COUNTRY LAKES LANE SARASOTA FL 34243	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAFABREQUE, JOHN 5486 KELLY DR. SARASOTA FL 34233	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BLASER, JOHN 1315 QUAIL DR. SARASOTA, FL 34231	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BAGOT, FRANK 1519 CLOWER CREEK DR. H252 SARASOTA, FL 34231	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LAFABREQUE, JOHN 5486 KELLY DR. SARASOTA, FL 34233	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D. DEAL, GARY 1817 BUCCANEER TERRACE SARASOTA, FL 34231	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

GENE D. OLSEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/01

Date

941-351-1661

Daytime Phone #

CR2E037 (10/00)