

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002948

FILED  
Jan 25, 2008  
Secretary of State

**Entity Name:** EASTER SEALS SOUTHWEST FLORIDA FOUNDATION, INC.

**Current Principal Place of Business:**

350 BRADEN AVENUE  
SARASOTA, FL 34243

**New Principal Place of Business:**

**Current Mailing Address:**

350 BRADEN AVENUE  
SARASOTA, FL 34243

**New Mailing Address:**

**FEI Number:** 65-0611186

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

NAJMY, JOSEPH L  
6320 VENTURE DRIVE, SUITE #104  
BRADENTON, FL 34202 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: D ( ) Delete  
Name: SMITHMAN, JOHN M  
Address: 5678 FRUITVILLE ROAD #6  
City-St-Zip: SARASOTA, FL 34232 US

Title: D ( ) Delete  
Name: SMALL, HARVEY A  
Address: 1819 MAIN STREET # 301  
City-St-Zip: SARASOTA, FL 34236 US

Title: D ( ) Delete  
Name: JUDGE, VIRGINIA M  
Address: 7893 WILTON CRESCENT CIRCLE  
City-St-Zip: UNIVERSITY PARK, FL 34201 US

Title: CD ( ) Delete  
Name: SPERLING, MATT  
Address: 5104 WINDWARD AVENUE  
City-St-Zip: SARASOTA, FL 34242 US

Title: TD ( ) Delete  
Name: MCKOWN, KATHLEEN  
Address: 8065 BENEVA ROAD S  
City-St-Zip: SARASOTA, FL 34238 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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: WILLIAM T. LLOYD

CEO

01/25/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date