

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003105

FILED
Jan 17, 2009
Secretary of State

Entity Name: THE FLORIDA SUNCOAST WOMEN'S FORUM, INC.

Current Principal Place of Business:

2904 MAGDALENE WOODS DR.
TAMPA, FL 33618 US

New Principal Place of Business:

6120 S. LOCKWOOD RIDGE
SARASOTA, FL 34231 US

Current Mailing Address:

2904 MAGDALENE WOODS DR.
TAMPA, FL 33618 US

New Mailing Address:

6120 S. LOCKWOOD RIDGE
SARASOTA, FL 34231 US

FEI Number: 65-0846853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, CAROL B
136 GOLDEN GATE POINT, #302
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

NOYES, KIMBERLY A
6120 S. LOCKWOOD RIDGE RD
SARASOTA, FL 34231 US

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: KIMBERLY NOYES

01/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GREEN, CAROL
Address: 136 GOLDEN GATE POINT, #302
City-St-Zip: SARASOTA, FL 34236

Title: P () Delete
Name: BUCHANAN, CAROL
Address: 5346 EVERWOOD RUN
City-St-Zip: SARASOTA, FL 34235

Title: V () Delete
Name: HANSEN, TERI
Address: 601 TAMIAMI TRAIL
City-St-Zip: VENICE, FL 34285

Title: S () Delete
Name: ZARRO, JAN
Address: 340 S. TUTTLE ST.
City-St-Zip: SARASOTA, FL 34237

Title: T (X) Delete
Name: FORRISTALL, MARY
Address: 3404 17TH ST.
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HANSEN, TERI
Address: 601 S. TAMIAMI TRAIL
City-St-Zip: VENICE, FL 34285

Title: T (X) Change () Addition
Name: MAKOWSKI, KAREN
Address: 50 JOEL BLVD.
City-St-Zip: LEHIGH ACRES, FL 33936

Title: V (X) Change () Addition
Name: STRYKER, LAURIE
Address: 6618 VIRGINIA CROSSING
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: S (X) Change () Addition
Name: START, JOANNE
Address: P. O. BOX 1687
City-St-Zip: ST. PETERSBURG, FL 33731

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: KAREN MAKOWSKI

T

01/17/2009

Electronic Signature of Signing Officer or Director

Date