2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003757

Entity Name: SARASOTA K-9 SEARCH AND RESCUE, INC.

FILED Mar 22, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
	NTRY MEADON A, FL 34235	VS BLVD						
Current Mailing Address:				New Mailing Address:				
4730 COUNTRY MEADOWS BLVD SARASOTA, FL 34235				P.O. BOX 51446 SARASOTA, FL 34232				
FEI Number: 65-0845818 FEI Number Applied For ()		FEI Number Applied For ()	FEI Nun	Number Not Applicable () Certificate of Status Desired ()			s Desired()	
Name and	Address of Cu	ırrent Registered Agent:		Name and	Address of N	lew Registered A	gent:	
SARASOTA	NTRY MEADON A, FL 34235 named entity su	WS BLVD US ubmits this statement for the pu	rpose o	f changing it	s registered o	ffice or registered	agent, or both,	
SIGNATUR	RE:							
Electronic Signature of Registered Agent				Date				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	ABRAMS, PATRI	MEADOWS BLVD		Title: Name: Address: City-St-Zip:	()) Change ()Addition		
Title: Name: Address: City-St-Zip:	V ()[MOORE, BARBA 1425 NE 58TH A' OCALA, FL 3447	VE		Title: Name: Address: City-St-Zip:	ABRAMS, JOSI	Y MEADOWS BLVD		
Title: Name: Address: City-St-Zip:	JESSICA, LUCAS	MEADOWS BLVD.		Title: Name: Address: City-St-Zip:	ROSS, TRACY) Change ()Addition WOOD RIDGE RD .34239		
Title: Name: Address: City-St-Zip:	T () I TEW, TAMMY 271 GRANT RD VENICE, FL 342	Delete 92		Title: Name: Address: City-St-Zip:	T (X GROSS, VICTO 7104 COUNTY BRADENTON, I	ROAD 675 E		
Title: Name: Address: City-St-Zip:	D () I JOHNSON, MIKE 200 NORTH GRO VENICE, FL 342	OVE ST		Title: Name: Address: City-St-Zip:	D (X HAY, JON 2252 SHADOW SARASOTA, FL			
Title: Name: Address: City-St-Zip:	D ()[HALAS, JULIUS 5490 GULF OF N LONGBOAT KEY			Title: Name: Address: City-St-Zip:	()) Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VICTORIA GROSS T 03/22/2005