## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000006852

FILED Jan 31, 2005 Secretary of State

Entity Name: THE WELCOME CLUB OF SARASOTA, INC.

Current Principal Place of Business: New Principal Place of Business:

4907 OLD TREE PLACE 668 CLEAR CREEK DRIVE SARASOTA, FL 34233 US OSPREY, FL 34229 US

Current Mailing Address: New Mailing Address:

P O BOX 5125 SARASOTA, FL 34277

FEI Number: 65-0890035 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PLATT, SHIRLY
4907 OLD TREE PLACE
SARASOTA, FL 34233 US

MUNGER, JEANNETTE
668 CLEAR CREEK DRIVE
OSPREY6, FL 34229 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: JEANNETTE MUNGER 01/31/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 PLATT, SHIRLY
 Name:
 MUNGER, JEANNETTE

 Address:
 4907 OLD TREE PLACE
 Address:
 668 CLEAR CREEK DRIVE

 City-St-Zip:
 SARASOTA, FL 34233
 City-St-Zip:
 OSPREY, FL 34229

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 MUNGER, JEANETTE
 Name:
 MORRIS, CAROL

 Address:
 668 CLEAR CREEK DR
 Address:
 2299 VINTAGE STREET

 City-St-Zip:
 OSPREY, FL 34229
 City-St-Zip:
 SARASOTA, FL 34240

 Name:
 MORRIS, CAROL
 Name:
 DWYER, CECE

 Address:
 2299 VINTAGE STREET
 Address:
 7471 ROXYE LANE

 City-St-Zip:
 SARASOTA, FL 34240
 City-St-Zip:
 SARASOTA, FL 34240

Title: TD () Delete Title: () Change () Addition

 Name:
 WEST, JOLYN
 Name:

 Address:
 8969 MISTY CREEK DRIVE
 Address:

 City-St-Zip:
 SARASOTA, FL 34241
 City-St-Zip:

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: JOLYN C. WEST TD 01/31/2005