2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 16, 2007 8:00 am Secretary of State

DOCUMENT # 702362 1. Entity Name SARASOTA OPERA ASSOCIATION, INC.				01-16-2007 90185 015 ****61.25
Principal Place of Business 61 N PINEAPPLE AVE. SARASOTA, FL 34236-2716		Mailing Address 61 N PINEAPPLE AVE. SARASOTA, FL 34236-2716		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01092007 Chg-NP CR2E037 (12/06)
City & State		City & State		4. FEI Number Applied For Not Applicable 23-7089047 Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current I	Registered Agent		7. Name and Address of New Registered Agent
DANIS, SUSAN T 61 NORTH PINEAPPLE AVE. SARASOTA, FL 33577-5716			Street Add	dress (P.O. Box Number is Not Acceptable)
	^		City	FL Zip Code
the obligati	Signature, typed or printed name of registered agent a	V Sesan 7	Registered Agent signature	Executive Jineschan Executive Jineschan Onte Bake check payable to
	Due by May 1, 2007	Trust Fund Co		Added to Fees Florida Department of State
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF C BAVARIA, EDWARD C 4083 SHELL RD SARASOTA, FL 342421139	Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Change Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC WOOD, JOAN 340 S PALM AVENUE #112 SARASOTA, FL 34236	☐ Celete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BRUALDI VIVSSES DE SADDITION DE LA ADDITION DE SADDITION
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CLARKSON, JULIAN L 1515 RINGLING BLVD.,SUITE 80 SARASOTA, FL 34236	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Hull Richard Way # ZY (Anasora II 34736
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED DANIS, SUSAN T 555 S.GULFSTREAM AVE #304 SARASOTA, FL 34236	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SILVER, PATRICIA 480 MEADOW LARK DR. SARASOTA, FL 342361924	7 Belete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	cortify that the information supplied with	Delete	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 exemptions contained 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 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 inflowered 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:

ED OR PRINTED NAME OF SHOWING OFFICER OR DIRECTOR,

Date Daylime Phone #