FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 704092 (6)

1. Corporation Name
SARASOTA GARDEN CLUB, INCORPORATED

Principal Place of Business	Mailing Address
1131 BOULEVARD OF THE ARTS SARASOTA FL 34236	1131 BOULEVARD OF THE ARTS SARASOTA FL 34236

3. Date Incorporated or Qualified: 05/24/1962
3a. Date of Last Report: 01/30/1995

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-0968250 ☑ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SCHUMACHER, MRS. R. (GLORIA)
1937 BROOKHAVEN DR
SARASOTA FL 34239

10. Name and Address of New Registered Agent

81 Name: Mrs. Dale Burns (Marie)
82 Street Address (P.O. Box Number is Not Acceptable): 4647 Glebe Farm Rd.
83
84 City: Sarasota **FL** 85 Zip Code: 34235

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0505, Florida Statutes.

SIGNATURE: L. Marie Ann Burns
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD COOK, MRS. DAVID M MRS 3300 DUNCAN AVE SARASOTA FL	☒ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	PD LaBrie, Mrs. Catherine 1024 Rhodes Ave. Sarasota, Fl 34237 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CLACK, W. P MRS. 1348 HARBOR DR SARASOTA FL	☒ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	VD Blau, Mrs. Shirl Rea 8401 Turnberry Circle Sarasota, Fl. 34241 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SCOTT, LEE M 7252 BRUGHTON ST SARASOTA FL	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	800017311 98 -03/04/96--01098--007 ***61.25 — ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BURNS, MRS. DALE 4647 GLEBE FARM RD SARASOTA FL	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	Treasurer Mrs. Dale Burns 4647 Glebe Farm Rd. Sarasota, Fl. 34235 — ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD LANG, DENNIS M 4158 PALAU DR SARASOTA FL	☒ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	Secretary Mrs. Sue Angle 7578 Fairlinks Ct. Sarasota, Fl. 34243 — ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD SCHUMACHER, MRS RICHARD 1937 BROOKHAVEN DR SARASOTA FL	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	Asst.Treas. Mrs. Richard Schumacher 1937 Brookhaven Dr. Sarasota, Fl. 34239 — ☒ Change ☐ Addition

CR2E037 (12/95)

3-2-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Marie Ann Burns - Marie Ann Burns 1-22-96 941-955-0875
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #