FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 30 AM 9:28

DOCUMENT # 720008 (2)

1. Corporation Name
ALTRUSA CLUB OF SARASOTA, FLORIDA, INC.

Principal Place of Business	Mailing Address
2555 GROVE ST SARASOTA FL 34239-4720 US	2555 GROVE ST SARASOTA FL 34239-4720 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/08/1971
3a. Date of Last Report: 01/21/1994
4. FEI Number: NOT APPLICABLE ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 3017 WILLOW GREEN	26 3017 WILLOW GREEN
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 SARASOTA, FL	City & State 28 SARASOTA, FL
Zip 24 34235 Country 25 USA	Zip 29 34235 Country 30 USA

9. Name and Address of Current Registered Agent

SHIVERS, JOYCE
405 ARCHIBALD AVENUE
SARASOTA FL 34243

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	T	1.1 TITLE	TREASURER	☒ Change ☐ Addition
NAME	DUNN, SANDRA	1.2 NAME	~~JOAN ADAMS~~ ADAMS, JOAN	
STREET ADDRESS	2555 GROVE ST	1.3 STREET ADDRESS	2706 SHERIDAN DR	
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	SARASOTA, FL 34239	
TITLE	V	2.1 TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	ADAMS, JOAN	2.2 NAME	REGGER, MARY	
STREET ADDRESS	2706 SHERIDAN DR	2.3 STREET ADDRESS	3017 WILLOW GREEN	
CITY-ST-ZIP	SARASOTA, FL 00000	2.4 CITY-ST-ZIP	SARASOTA, FL 34235	
TITLE	D	3.1 TITLE	SECRETARY	☒ Change ☐ Addition
NAME	HARALSON, WANDA	3.2 NAME	HARALSON, WANDA	
STREET ADDRESS	2840 HOPE ST	3.3 STREET ADDRESS	2840 HOPE ST	
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	SARASOTA, FL 34231	
TITLE	D	4.1 TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	MINYARD, LAURA MAE	4.2 NAME	DUNN, SANDRA	
STREET ADDRESS	2524 RIVERBLUFF PARKWAY #175	4.3 STREET ADDRESS	2555 GROVE ST	
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP	SARASOTA, FL 34239	
TITLE	D	5.1 TITLE	DIRECTOR	☐ Change ☐ Addition
NAME	ADAMS, JOAN	5.2 NAME	DOCKING, JANICE	
STREET ADDRESS	2706 SHERIDAN	5.3 STREET ADDRESS	2363 DOUD ST	
CITY-ST-ZIP	SARASOTA, FL 00000	5.4 CITY-ST-ZIP	SARASOTA, FL 34231	
TITLE	P	6.1 TITLE		☐ Change ☐ Addition
NAME	DOCKING, JANICE	6.2 NAME		
STREET ADDRESS	2363 DOUD ST	6.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	6.4 CITY-ST-ZIP		

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: Mary Regger MARY REGGER/PRESIDENT 1/21/95 (813) 377-6213
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0003768