

# 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 # 720008 (2)**

1. Corporation Name

**ALTRUSA CLUB OF SARASOTA, FLORIDA, INC.**



Principal Place of Business

Mailing Address

**3017 WILLOW GREEN  
SARASOTA FL 34235  
US**

**3017 WILLOW GREEN  
SARASOTA FL 34235  
US**

3. Date Incorporated or Qualified  
**01/08/1971**

3a. Date of Last Report  
**01/30/1995**

2. Principal Place of Business  
**21 2706 SHERIDAN DR**

2a. Mailing Address  
**26 2706 SHERIDAN DR**

4. FEI Number  
**NOT APPLICABLE**

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

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

City & State  
**23 SARASOTA, FL**

City & State  
**28 SARASOTA, FL**

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

Zip  
**24 34239**

Country

Zip  
**29 34239**

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHIVERS, JOYCE  
405 ARCHIBALD AVENUE  
SARASOTA FL 34243**

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 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 617.0503, Florida Statutes.

SIGNATURE

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 **T** ☐ DELETE  
NAME **ADAMS, JOAN**  
STREET ADDRESS **2706 SHERIDAN DR.**  
CITY-ST-ZIP **SARASOTA FL**

1.1 TITLE **P** ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE **P** ☐ DELETE  
NAME **RESSER, MARY**  
STREET ADDRESS **3017 WILLOW GREEN**  
CITY-ST-ZIP **SARASOTA, FL 00000**

2.1 TITLE **T** ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE **S** ☐ DELETE  
NAME **HARALSON, WANDA**  
STREET ADDRESS **2840 HOPE ST**  
CITY-ST-ZIP **SARASOTA FL**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **DUNN, SANDRA**  
STREET ADDRESS **2555 GROVE ST.**  
CITY-ST-ZIP **SARASOTA FL**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **DOCKING, JANICE**  
STREET ADDRESS **2363 DOUD ST.**  
CITY-ST-ZIP **SARASOTA, FL 00000**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE **P** ☒ DELETE  
NAME **DOCKING, JANICE**  
STREET ADDRESS **2363 DOUD ST**  
CITY-ST-ZIP **SARASOTA FL**

6.1 TITLE **RESSER, MARY - D** ☒ Change ☒ Addition  
6.2 NAME **3017 WILLOW GREEN**  
6.3 STREET ADDRESS **SARASOTA, FL 34235**  
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)(k), 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 Resser*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/20/96 (941) 577-6213**

Date

Daytime Phone #

CR2E037 (12/95)