

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730901

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** SARASOTA COUNTY 4-H FOUNDATION, INC.

**Current Principal Place of Business:**

6700 CLARK RD  
SARASOTA, FL 34241 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 48408  
SARASOTA, FL 34230 US

**New Mailing Address:**

FEI Number: 59-1593740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHOOK, CHRISTINA L  
38400 CLAY GULLEY RD  
MYAKKA CITY, FL 34251 US

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

DREW, THOMAS O  
6700 CLARK ROAD  
SARASOTA, FL 34241 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: THOMAS O. DREW

04/28/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PARL  
Name: SCHOOK, CHRISTINA  
Address: 38400 CLAY GULLEY RD  
City-St-Zip: MYAKKA CITY, FL 34251

Title: P  
Name: LIEDL, GEORGE  
Address: 6700 CLARK ROAD  
City-St-Zip: SARASOTA, FL 34241

Title: VP  
Name: HALEY, JUNE  
Address: 38400 CLAY GULLEY ROAD  
City-St-Zip: MYAKKA CITY, FL 34251

Title: S  
Name: CHAPMAN, ANNETTE  
Address: 38400 CLAY GULLEY RD  
City-St-Zip: MYAKKA CITY, FL 34251

Title: T  
Name: DREW, THOMAS  
Address: 6700 CLARK ROAD  
City-St-Zip: SARASOTA, FL 34241

I hereby 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 all other like empowered.

SIGNATURE: THOMAS O. DREW

TREA

04/28/2010

Electronic Signature of Signing Officer or Director

Date