

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731835

FILED
Apr 29, 2004
Secretary of State

Entity Name: THE FLORIDA HOUSE FOUNDATION OF SARASOTA, INC.

Current Principal Place of Business:

4600 BENEVA RD. S.
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

4600 BENEVA RD. S.
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 56-1608033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSBORN, W. TERRY
2477 STICKNEY POINT ROAD
SUITE 114-A
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CLEVELAND, JOHN
Address: 550 THREE MILE ROAD
City-St-Zip: GRAND RAPIDS, MI 49544

Title: T () Delete
Name: BISHOP, BILL
Address: 3149 BEE RIDGE RD
City-St-Zip: SARASOTA, FL 34239

Title: D () Delete
Name: OSBORN, TERRY
Address: 2477 STICKNEY POINT RD., #114-A
City-St-Zip: SARASOTA, FL

Title: D () Delete
Name: SMITH, FRANK F
Address: 330 S. PINEAPPLE AVE., STE. 206
City-St-Zip: SARASOTA, FL

Title: D () Delete
Name: LAMBIE, JOHN
Address: 4600 BENEVA ROAD S
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: BRAN, DAVID
Address: 5700 N. TAMiami TRAIL
City-St-Zip: SARASOTA, FL 34243

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TERRY OSBORN

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date