

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 08, 2008
Secretary of State

DOCUMENT# 734306

Entity Name: SARASOTA SHELL CLUB, INC..

Current Principal Place of Business:MOTE MARINE LABORATORY
1600 KEN THOMPSON PARKWAY
SARASOTA, FL 34236 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 48217
SARASOTA, FL 34230 US**New Mailing Address:**P.O. BOX 575
TALLEVAST, FL 34270 US

FEI Number: 35-2335528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:GAULIN, MARILYN S
4407 33RD COURT EAST
BRADENTON, FL 34203 US**Name and Address of New Registered Agent:**LEGGAT, SHARON
4534 DEER CREEK BLVD
SARASOTA, FL 34238 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: SHARON LEGGAT

09/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: CHMIELEWSKI, JOANNE
Address: 3806 33RD AVE. WEST
City-St-Zip: BRADENTON, FL 34205Title: VP () Delete
Name: WEDGE, JAMES
Address: 445 SUNGRASS BRIDGE RD.
City-St-Zip: VENICE, FL 34292Title: T (X) Delete
Name: GAULIN, MARILYN
Address: 4407 33RD CT. EAST
City-St-Zip: BRADENTON, FL 34203Title: S (X) Delete
Name: MCSWEEN, JANICE
Address: 379 PEPPERTREE RD
City-St-Zip: VENICE, FL 34293Title: CS (X) Delete
Name: WILLIAMS, PEGGY
Address: PO BOX 575
City-St-Zip: TALLEVAST, FL 34270Title: D (X) Delete
Name: SCHLUSEMANN, FRAN
Address: 11328 RIVERS BLUFF CIRCLE
City-St-Zip: BRADENTON, FL 34202**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: T (X) Change () Addition
Name: LEGGAT, SHARON
Address: 4534 DEER CREEK BLVD
City-St-Zip: SARASOTA, FL 34238Title: () 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 exemption stated in Chapter 119, 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: SHARON LEGGAT

T

09/08/2008

Electronic Signature of Signing Officer or Director

Date