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Feb 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 740625 (9)

1. Corporation Name

UNITED CEREBRAL PALSY OF SARASOTA-MANATEE, INC.

Principal Place of Business

Mailing Address

1227 S. TAMiami TRAIL
SARASOTA FL 34239

1090 S. TAMiami TRAIL
SARASOTA FL 34236-9116



3. Date Incorporated or Qualified 10/26/1977
3a. Date of Last Report 02/22/1996

2. Principal Place of Business

2a. Mailing Address

21 []

26 C/O Les Leech, Jr.

4. FEI Number 59-1796622
Applied For Not Applicable

22 Suite, Apt. #, etc. 1090 South Tamiami Trail

27 Suite, Apt. #, etc. 9040 Sunset Drive

5. Certificate of Status Desired [X] \$8.75 Additional Fee Required

23 City & State Sarasota, FL

28 City & State Miami, FL

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

24 Zip 34236

25 Country US

29 Zip 33173-3454

30 Country US

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEECH, LESLIE W JR
9040 SUNSET DR.
SUITE 70A
MIAMI FL

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input type="checkbox"/> DELETE
NAME	MARSH, PETE	
STREET ADDRESS	4190 DRAKESWOOD CIRCLE	
CITY-ST-ZIP	SARASOTA FL 34232	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WEINGER, STEVEN M	
STREET ADDRESS	2850 SW 27TH AVENUE, 2ND FL	
CITY-ST-ZIP	MIAMI FL 33133	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GREENBERG, BARNETT	
STREET ADDRESS	7761 SW 176TH STREET	
CITY-ST-ZIP	MIAMI FL 33157	
TITLE	P	<input type="checkbox"/> DELETE
NAME	LEECH, LES JR	
STREET ADDRESS	9040 SUNSET DR. SUITE 70-A	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE	S	<input type="checkbox"/> DELETE
NAME	WEEKS, JAMES G	
STREET ADDRESS	9040 SUNSET DR. SUITE 70-A	
CITY-ST-ZIP	MIAMI FL 33173	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing 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: _____

UNITED CEREBRAL PALSY OF SARASOTA-MANATEE, INC.

2/18/97

305-596-9040

CR2E037 (9/96)