2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 03, 2008 08:00 A Secretary of State **DOCUMENT # 741151** 1. Entity Name SARASOTA PROFESSIONAL ARTS ALLIANCE, INC. Principal Place of Business Mailing Address 61 N. PINEAPPLE AVE 61 N. PINEAPPLE AVE SARASOTA FL 34236 SARASOTA FL 34236 2. Principal Place of Business - No P.O. Box # 3: Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 1st MOORE CR2E037 (10/07) City & State City & State Applied For 4. FEI Number NO-T APPLICABLE Not Applicable Zip Zφ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCKENNA, JOSEPH Street Address (P.O. Box Number is Not Acceptable) 709 N TAMIAMI TRL SARASOTA FL 34236 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or conted harve of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) PHARLE HERRITHERRIGH, PRA FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2008 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE Change Addition LANGFORD, REBBECCA NAME 1241 N. PALM AVE. STREET ADDRESS STREET ADDRESS SARASOTA FL 34236 CITY-ST-ZIP CITY-ST-ZIP TITLE Delate 03/18/03-80028-00**78****** MCKENNA, JOE NAME NAME 709 N TAMIAMI STREET ADDRESS STREET ADDRESS SARASOTA FL 34236 CITY-ST-ZIP CITY-ST-ZiP YITLE ☐ Delete TITLE Change ☐ Addition DEGABRIELE, LINDA NAME NAME 5555 N TAMIAMI TRAIL STREET ADDRESS STREET ADDRESS SARASOTA FL 34243 City-St-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition DEWARREN, ROBERT NAME 5555 N TAMIAMI TRAIL STREET ADDRESS STREET ADDRESS SARASOTA FL 34243 CITY-ST-7IP CITY-ST-ZiP TIFLE ☐ Delete TITLE Change Addition MCLAIN, GEORGE NAME NAME 1345 MAIN ST STE E STREET ADDRESS STREET ADDRESS SARASOTA FL 34236 CITY-ST-ZIP CITY-ST-ZIP PD TITLE Delete TITLE Change ☐ Addition DANIS, SUSAN T HAME NAME 61 N PINÉAPPLE STREET ADDRESS STRUET ADDRESS SARASOTA FL 34236 CITY-ST-ZIP

SIGNATURE:

Joseph McKenna

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under nath; 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 10 or Block 11 if changed, or on an attachment with an archives with all other like empowered.

2-28.2008

FILED