DOCUMENT # 748595

1. Entity Name

SAFE PLACE AND RAPE CRISIS CENTER, INC. OF SARAS

FILED
Feb 26, 2001 8:00 am
Secretary of State
01-29-2001 90156 033 ****70.00

Principal Place of Business	Mailing Address
1750 17TH ST. UNIT H SARASOTA FL 34234	1750 17TH ST. UNIT H SARASOTA FL 34234

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2139 Main Street	2139 Main Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sarasota, FL	City & State: Sarasota, FL
Zip: 34237 Country:	Zip: 34237 Country:

4. FEI Number 59-1943399 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WOODS, STEPHANIE C 1750 17TH ST., UNIT H SARASOTA FL 34234 CORRECTED =========	Name Street Address (P.O. Box Number is Not Acceptable): 2139 Main Street City: Sarasota **FL** Zip Code: 34237

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.

SIGNATURE X Stephanie C. Woods X 1-17-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D THOMAS, OLIVIA 7615 WEEPING WILLOW CIR SARASOTA FL 34241	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Jennifer Saslaw 541 Norsota Way Sarasota, FL 34242	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BRUDERLE, LOUISE 984 INDIAN BEACH DR SARASOTA FL 34234	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Derek W. Billib 5418 Siesta Cove Drive Sarasota, FL 34242	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SASLAW, JENNIFER 1003 WESTWAY DR SARASOTA FL 34236	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Mary E. Brown P. O. Box 3498 Sarasota, FL 34230	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEREK BILLIB 5418 SIESTA COVE DR. SARASOTA FL 34242	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Alice Davidson 555 Verna Road Sarasota, FL 34240	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GAY, JEAN B. 1435 KIMLIRA LANE SARASOTA FL 34231	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Stephanie C. Woods 2604 Botany Avenue Sarasota, FL 34239	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BROWN, MARY E PO BOX 3498 SARASOTA FL 34230	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Olivia Thomas 4816 Arlington Road Palmetto, FL 34221	☒ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Stephanie C. Woods Stephanie C. Woods X 1-17-01 (941)365-0208
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #