2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # 756777

1. Entity Name
YMCA FOUNDATION OF SARASOTA, INC.

Principal Place of Business	Mailing Address
ONE SOUTH SCHOOL AVE STE 301 SARASOTA, FL 34237 US	ONE SOUTH SCHOOL AVE STE 301 SARASOTA, FL 34237 US

02222006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2115288
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

JOHN BERTEAUWILLIAMS PARKER ET AL
1550 RINGLING BLVD
SARASTOA, FL 34236

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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 N/A
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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

000000447671
03/08/06--80066-018 70.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GUSTAFSON, KARIN E.
STREET ADDRESS	4903 CORAL BLVD
CITY-ST-ZIP	BRADENTON, FL
TITLE	2VC
NAME	GEIMER, LARRY
STREET ADDRESS	1515 RINGLING BLVD #890
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	T
NAME	MCGINNESS, LEE
STREET ADDRESS	1800 2ND STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	1VC
NAME	KANE, JANET H
STREET ADDRESS	539 NORSOTA WAY
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	C
NAME	BOWMAN, PAUL
STREET ADDRESS	2141 GULF OF MEXICO DR
CITY-ST-ZIP	LONGBOAT KEY, FL 34228
TITLE	S
NAME	BAND, DAVID
STREET ADDRESS	240 SOUTH PINEAPPLE AVE
CITY-ST-ZIP	SARASOTA, FL 34236

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Karin E. Gustafson 2/24/06 941-951-2916
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # X1006