

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762401

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: SARASOTA FRUIT AND NUT SOCIETY, INC.

**Current Principal Place of Business:**

5555 S. TAMIAMI TR  
SARASOTA, FL 34293 US

**New Principal Place of Business:**

**Current Mailing Address:**

POB 536  
NOKOMIS, FL 34274 US

**New Mailing Address:**

FEI Number: 59-2170207      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SIMS, DEBRA A  
330 LYCHEE RD  
NOKOMIS, FL 34275 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: LANDRY, GAIL  
Address: 2926 YORKTOWN ST  
City-St-Zip: SARASOTA, FL 34231

Title: V ( ) Delete  
Name: SCHWABACH, REID  
Address: 2839 W TAMIAMI CIRCLE  
City-St-Zip: SARASOTA, FL 342349

Title: P ( ) Delete  
Name: JOE, BARRETTA  
Address: 1118 HOOVER ST  
City-St-Zip: NOKOMIS, FL 34275

Title: S ( ) Delete  
Name: FOX, BONNIE  
Address: 312 DALE ST  
City-St-Zip: NOKOMIS, FL 34275

Title: VP ( ) Delete  
Name: DEBRA, SIMS  
Address: 330 LYCHEE RD  
City-St-Zip: NOKOMIS, FL 34275

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: SCHWABACH, REID  
Address: 2839 W TAMIAMI CIRCLE  
City-St-Zip: SARASOTA, FL 342349

Title: VP (X) Change ( ) Addition  
Name: TED, CURRY  
Address: 725 GULF COAST BLVD.  
City-St-Zip: VENICE, FL 34285

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: DEBRA, SIMS A  
Address: 330 LYCHEE RD  
City-St-Zip: NOKOMIS, FL 34275

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: DEBRA A. SIMS

VP

01/14/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date