2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001965

FILED Jan 28, 2009 Secretary of State

Entity Name: SARASOTA COALITION ON SUBSTANCE ABUSE, INC.

Current Principal Place of Business: New Principal Place of Business:

4409 SAWYER ROAD 701 MCINTOSH ROAD SARASOTA, FL 34233 SARASOTA, FL 34232

Current Mailing Address: New Mailing Address:

P.O. BOX 51985 701 MCINTOSH ROAD SARASOTA, FL 34232 SARASOTA, FL 34232

FEI Number: 65-1084957 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

LAVARELLO, CURTIS ED.

4409 SAWYER ROAD

SARASOTA, FL 34233 US

LAVARELLO, CURTIS ED.

701 MCINTOSH ROAD

SARASOTA, FL 34232 US

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: CURTIS S. LAVARELLO 01/28/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 ED
 () Delete
 Title:
 ED
 (X) Change () Addition

 Name:
 LAVARELLO, CURTIS S

Name:

 Address:
 4409 SAWYER ROAD
 Address:
 701 MCINTOSH ROAD

 City-St-Zip:
 SARASOTA, FL 34233
 City-St-Zip:
 SARASOTA, FL 34232

Title: D () Delete Title: () Change () Addition

 Name:
 RANDLE, THOMAS
 Name:

 Address:
 P.O. BOX 15407
 Address:

 City-St-Zip:
 SARASOTA, FL 34277
 City-St-Zip:

Title: VC () Delete Title: VC (X) Change () Addition

 Name:
 ENOS, TIMOTHY
 Name:
 ENOS, TIMOTHY

 Address:
 PO BOX 51985
 Address:
 1960 LANDINGS BLVD.

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:
 SARASOTA, FL 34231

Title: T () Delete Title: () Change () Addition

 Name:
 FLACK, GEORGE
 Name:

 Address:
 P.O. BOX 51985
 Address:

 City-St-Zip:
 SARASOTA, FL 34232
 City-St-Zip:

Title: C () Delete Title: () Change () Addition

 Name:
 REYNOLDS, SHERRI
 Name:

 Address:
 1960 LANDINGS BLVD.
 Address:

 City-St-Zip:
 SARASOTA, FL 34231
 City-St-Zip:

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: CURTIS S. LAVARELLO ED 01/28/2009

Electronic Signature of Signing Officer or Director

Date