

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002644

FILED  
Jan 10, 2009  
Secretary of State

**Entity Name:** THE JAMES JOYCE SOCIETY OF SARASOTA, INC.

**Current Principal Place of Business:**

P.O. BOX 1253  
SARASOTA, FL 34230

**New Principal Place of Business:**

7404 WEEPING WILLOW BLVD  
SARASOTA, FL 34241

**Current Mailing Address:**

P.O. BOX 1253  
SARASOTA, FL 34230

**New Mailing Address:**

**FEI Number:** 22-3781038

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MATTHEWS, TERENCE  
5190 26TH STREET WEST  
SUITE D  
BRADENTON, FL 34207 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: PR ( ) Delete  
Name: MUESSLE, ELIZABETH  
Address: 7326 WINDEMERE LANE  
City-St-Zip: BRADENTON, FL 34201

Title: T ( ) Delete  
Name: SULLIVAN, MARCIA  
Address: 7404 WEEPING WILLOW BLVD  
City-St-Zip: SARASOTA, FL 34241

Title: SEC ( ) Delete  
Name: HOFFMAN, MARGARET  
Address: 5045 VILLAGE GARDEN  
City-St-Zip: SARASOTA DR, FL 34243

Title: V ( ) Delete  
Name: O'HALLORAN, KEVIN  
Address: 5078 MARSHFIELD RD  
City-St-Zip: SARASOTA, FL 34235

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

Title: PR (X) Change ( ) Addition  
Name: MUESSLE, ELIZABETH  
Address: 7326 WINDEMERE LANE  
City-St-Zip: UNIVERSITY PARK, FL 34201

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: MARCIA SULLIVAN

T

01/10/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date