

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008614

FILED
Jan 20, 2009
Secretary of State

Entity Name: WHITESANDS VOLLEYBALL OF SARASOTA, INC.

Current Principal Place of Business:

2922 HILLVIEW ST
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

2922 HILLVIEW ST
SARASOTA, FL 34239

New Mailing Address:

FEI Number: 65-1158174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTGOMERY, RUTH E
2922 HILLVIEW
SARASOTA, FL 34239 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: D () Delete
Name: MONTGOMERY, SCOTT J
Address: 2922 HILLVIEW ST
City-St-Zip: SARASOTA, FL 34239

Title: D () Delete
Name: MONTGOMERY, RUTH
Address: 2922 HILLVIEW STREET
City-St-Zip: SARASOTA, FL 34239

Title: D () Delete
Name: ERB, SHERRY
Address: 1100 BEN FRANKLIN DR 702
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: RUTH MONTGOMERY

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date