


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT # NO1000008651 1. Entity Name SARASOTA PREDATORS INC.	
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Principal Place of Business 4302 MEADOWLAND CIRCLE SARASOTA FL 34233	Mailing Address 4302 MEADOWLAND CIRCLE SARASOTA FL 34233
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2. Principal Place of Business	3. Mailing Address	4. FEI Number 30-0021101
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Applied For <input type="checkbox"/> Not Applied
City & State	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
Zip	Country	Zip

1st MOORE CR2E037 (10/05)

6. Name and Address of Current Registered Agent

**HARTMAN, DAVID R
4302 MEADOWLAND CIRCLE
SARASOTA FL 34233**

7. Name and Address of New Registered Agent

Name _____

Street Address (P.O. Box Number is Not Acceptable) _____

City _____ **FL** Zip Code _____

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

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE	DP HARTMAN, DAVID <input type="checkbox"/> Delete
NAME	HARTMAN, DAVID
STREET ADDRESS	4302 MEADOWLAND CIRCLE
CITY - ST - ZIP	SARASOTA FL 34233
TITLE	D <input type="checkbox"/> Delete
NAME	AGRIESTI, JEFFREY
STREET ADDRESS	123 141ST CT N.E.
CITY - ST - ZIP	BRADENTON FL 34202
TITLE	D <input type="checkbox"/> Delete
NAME	PITTMAN, THOMAS
STREET ADDRESS	6134 TURNBERRY PK APT 7102
CITY - ST - ZIP	SARASOTA FL 34243
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	U00000511021~M
STREET ADDRESS	04/29/06-80030-014 70.00~M
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *David R Hartman* **4-8-06** **941-377-7995**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR