

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004366

FILED
Jul 01, 2009
Secretary of State

Entity Name: SARASOTA CENTER OF SPIRITUAL AWARENESS, INC.

Current Principal Place of Business:

7264 ANTIGUA PLACE
SARASOTA, FL 34231 US

New Principal Place of Business:

Current Mailing Address:

C/O REV DUFFY RUTLEDGE
7264 ANTIGUA PLACE
SARASOTA, FL 34231 US

New Mailing Address:

FEI Number: 01-0731343 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PFINGSTEN, ROSS W
9526 59TH AVENUE EAST
BRADENTON, FL 34202 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: P () Delete
Name: RUTLEDGE, GAIL
Address: 7264 ANTIGUA PLACE
City-St-Zip: SARASOTA, FL 34231 US

Title: VS () Delete
Name: BRUSCEMI, KATHI
Address: 4145 PALAU DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: T () Delete
Name: DONNELLON, SHIRLEY
Address: 2364 HIVELY STREET
City-St-Zip: SARASOTA, FL 34231

Title: T () Delete
Name: KEHS, ROB
Address: 3926 PALAU DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: T () Delete
Name: DANIELLE, KEHS
Address: 3926 PALAU DRIVE
City-St-Zip: SARASOTA, FL 34241

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:

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: KATHI BRUSCEMI

VS

07/01/2009

Electronic Signature of Signing Officer or Director

Date