

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005109

Entity Name: SARASOTA INFANT HOME, INC.

FILED
Apr 15, 2004
Secretary of State

Current Principal Place of Business:

2376 NOVUS STREET
SARASOTA, FL 34237

New Principal Place of Business:

Current Mailing Address:

2376 NOVUS STREET
SARASOTA, FL 34237

New Mailing Address:

FEI Number: 65-0869515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBB, SHARON
2376 NOVUS STREET
SARASOTA, FL 34237

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: PD () Delete
Name: ANDREWS, CHERYL J
Address: 1327 MAGELLAN DRIVE
City-St-Zip: BRADENTON, FL 34243

Title: STD () Delete
Name: ROBB, SEAN R
Address: 2048 DERBY GLEN DRIVE
City-St-Zip: ORLANDO, FL 32837

Title: VD () Delete
Name: ROBB, REBECCA
Address: 2048 DERBY GLEN DRIVE
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ANDREWS, CHERYL J
Address: 1327 MAGELLAN DRIVE
City-St-Zip: SARASOTA, FL 34243

Title: S/TR (X) Change () Addition
Name: ROBB, SEAN R
Address: 4212 AUTUMN LEAVES DRIVE
City-St-Zip: TAMPA, FL 33624

Title: VP (X) Change () Addition
Name: ROBB, REBECCA L
Address: 4212 AUTUMN LEAVES DRIVE
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SEAN R. ROBB

S/TR

04/15/2004

Electronic Signature of Signing Officer or Director

Date