

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007502

FILED
Apr 30, 2008
Secretary of State

Entity Name: BURNS SQUARE ASSOCIATION, INC.

Current Principal Place of Business:

1530 CROSS ST
SARASOTA, FL 34236

New Principal Place of Business:

508 S. PINEAPPLE AVE.
SARASOTA, FL 34236

Current Mailing Address:

1530 CROSS ST
SARASOTA, FL 34236

New Mailing Address:

508 S. PINEAPPLE AVE.
SARASOTA, FL 34236

FEI Number: 14-1850506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOACH, KRAIG H
1530 CROSS ST
SARASOTA, FL 34236 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: PD () Delete
Name: WRIGHT, MELANIE
Address: 533 S. PINEAPPLE AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: VD () Delete
Name: HELPHENSTINE, LISA
Address: 505 BURNS COURT
City-St-Zip: SARASOTA, FL 34236

Title: SD () Delete
Name: HATFIELD, ELIZABETH
Address: 407 S. PINEAPPLE AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: TD () Delete
Name: VINALES, JACK
Address: 539 S. PINEAPPLE AVE
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: DERHEIM, JAMES
Address: 508 S. PINEAPPLE AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: VP (X) Change () Addition
Name: BURKE, CHERYL
Address: 527 S. PINEAPPLE AVE.
City-St-Zip: SARASOTA, FL 34236

Title: SD (X) Change () Addition
Name: HELPHENSTINE, LISA
Address: 505 BURNS LANE
City-St-Zip: SARASOTA, FL 34236

Title: TD (X) Change () Addition
Name: FURMAN, RICHARD
Address: 434 S. ORANGE AVE.
City-St-Zip: SARASOTA, FL 34236

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: JAMES DERHEIM

PRES

04/30/2008

Electronic Signature of Signing Officer or Director

Date