2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000009426

FILED Nov 10, 2008 Secretary of State

Entity Name: SARASOTA COUNTY FOSTER/ADOPTIVE PARENT ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:	
	SON AVENUE A, FL 34231		
Current Mailing Address:		New Mailing Address:	
	SON AVENUE A, FL 34231		
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive		•	
DOUGLAS 4311 NELS	Address of Current Registered Agent: 5, CATHY SON AVENUE A, FL 34231 US	Name and	l Address of New Registered Agent:
	named entity submits this statement for the purpose of Florida.	of changing i	its registered office or registered agent, or both,
SIGNATUR	RE: CATHY DOUGLAS Electronic Signature of Registered Agent		 Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete DOUGLAS, CATHY PRES. 4311 NELSON AVENUE SARASOTA, FL 34231	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VD () Delete WILLIAMS, JENNIFER V-PRES. 2150 LAKEWOOD DRIVE NOKOMIS, FL 34275	Title: Name: Address: City-St-Zip:	VD (X) Change () Addition KRIZEN, NANCY V-PRES. 2324 PINEHURST SARASOTA, FL 34231
Title: Name: Address: City-St-Zip:	SD () Delete HALE, REBECCA SEC. 2713 WISTERIA PLACE SARASOTA, FL 34239	Title: Name: Address: City-St-Zip:	SD (X) Change () Addition JOHNSTON, PATTI SEC. 5752 FORESTER LAKE DRIVE SARASOTA, FL 34243
Title: Name: Address: City-St-Zip:	TD () Delete MEREDITH, CYNTHIA TREAS. 2410 CASEY KEY ROAD NOKOMIS, FL 34275	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete ESTES, DAN DIR. 2120 TUTTLE TERRACE SARASOTA, FL 34239	Title: Name: Address: City-St-Zip:	D (X) Change () Addition LUTZ, DAVID DIR. 1622 BANYAN DR. VENICE, FL 34293
Title: Name: Address: City-St-Zip:	D (X) Delete LUTZ, DAVID DIR. 1622 BANYAN DRIVE VENICE, FL 34293	Title: Name: Address: City-St-Zip:	() Change () Addition

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: CATHY DOUGLAS PD 11/10/2008