

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02545

FILED  
Mar 04, 2008  
Secretary of State

**Entity Name:** CENTER MANAGEMENT COMPANY OF SARASOTA, INC.

**Current Principal Place of Business:**

22 SARASOTA CENTER BLVD  
SARASOTA, FL 342409770 US

**New Principal Place of Business:**

**Current Mailing Address:**

6751 PROFESSIONAL PARKWAY WEST  
SUITE 107  
SARASOTA, FL 34240 US

**New Mailing Address:**

**FEI Number:** 59-2702879      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WEST, DANA  
22 SARASOTA CENTER BLVD  
SARASOTA, FL 34240 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: D ( ) Delete  
Name: POIRIER, PHIL  
Address: 300 SARASOTA CENTER BLVD  
City-St-Zip: SARASOTA, FL 34240

Title: PD ( ) Delete  
Name: LEPORE, MICHAEL  
Address: 31 SARASOTA CENTER BLVD  
City-St-Zip: SARASOTA, FL 34240

Title: SD ( ) Delete  
Name: BAAR, RICK  
Address: 233 SARASOTA CENTER BLVD  
City-St-Zip: SARASOTA, FL 34240

Title: VD ( ) Delete  
Name: WEST, DANA  
Address: 22 SARASOTA CENTER BLVD  
City-St-Zip: SARASOTA, FL 34240

Title: D ( ) Delete  
Name: ADLER, MARK  
Address: 78 SARASOTA CENTER BLVD  
City-St-Zip: SARASOTA, FL 34240

Title: TD ( ) Delete  
Name: GAMELIN, TONY  
Address: 6751 PROFESSIONAL PKWY W, SUITE 107  
City-St-Zip: SARASOTA, FL 34240

**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: D (X) Change ( ) Addition  
Name: SCHMIDT, GARY  
Address: 78 SARASOTA CENTER BLVD  
City-St-Zip: SARASOTA, FL 34240

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: TONY GAMELIN

T

03/04/2008

Electronic Signature of Signing Officer or Director

Date