

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001588

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** IRMA SCHUSTER FOUNDATION, INC.

**Current Principal Place of Business:**

800 S. OSPREY AVENUE  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

800 S. OSPREY AVENUE  
SARASOTA, FL 34236

**New Mailing Address:**

**FEI Number:** 01-0805754

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHEA, NORMAN J III  
800 S. OSPREY AVENUE  
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:** D  
**Name:** SCHUSTER, WILLIAM A  
**Address:** 3375 SEA VIEW STREET  
**City-St-Zip:** SARASOTA, FL 34239

**Title:** D  
**Name:** SHEA, NORMAN J III  
**Address:** 800 S. OSPREY AVENUE  
**City-St-Zip:** SARASOTA, FL 34236

**Title:** D  
**Name:** TATMAN, LESLIE  
**Address:** 4000 WAYNESVILLE ROAD  
**City-St-Zip:** WAYNESVILLE, OH 45068

**Title:** D  
**Name:** BEATTY, ALEXANDRA G  
**Address:** 5452 BENEVA WOODS CIRCLE  
**City-St-Zip:** SARASOTA, FL 34233

I hereby 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 all other like empowered.

**SIGNATURE:** NORMAN J SHEA III

D

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date