

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004689

FILED  
Jan 12, 2009  
Secretary of State

**Entity Name:** STRAWBERRY RIDGE COMMUNITY EMERGENCY RESPONSE TEAM, INC.

**Current Principal Place of Business:**

234 TAHO CIRCLE  
VALRICO, FL 33594

**New Principal Place of Business:**

234 TAHO CIRCLE  
VALRICO, FL 33594 US

**Current Mailing Address:**

234 TAHO CIRCLE  
VALRICO, FL 33594

**New Mailing Address:**

234 TAHO CIRCLE  
VALRICO, FL 33594 US

**FEI Number:** 14-1923035

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TATE, CAROL  
135 CHOO CHOO LANE  
VALRICO, FL 33594 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: SULLIVAN, MARTIN  
Address: 234 TAHO CIRCLE  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete  
Name: RAGONESE, LOIS  
Address: 624 KCLICKETY KLAK LANE  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete  
Name: TATE, CAROL  
Address: 135 CHOO CHOO LANE  
City-St-Zip: VALRICO, FL 33594

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SULLIVAN, MARTIN  
Address: 234 TAHO CIRCLE  
City-St-Zip: VALRICO, FL 33594 US

Title: D (X) Change ( ) Addition  
Name: SANDRA, HANSON  
Address: 626 KCLICKETY KLAK LANE  
City-St-Zip: VALRICO, FL 33594 US

Title: D (X) Change ( ) Addition  
Name: TATE, CAROL  
Address: 135 CHOO CHOO LANE  
City-St-Zip: VALRICO, FL 33594 US

Title: D ( ) Change (X) Addition  
Name: MARY ANN, RUFF  
Address: 104 CORAL CREST DRIVE  
City-St-Zip: VALRICO, FL 33594 US

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: MARTIN SULLIVAN

D

01/12/2009

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

\_\_\_\_\_  
Date