

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05527

FILED
Mar 27, 2009
Secretary of State

Entity Name: SUNCOAST OPTIMIST CLUB OF SARASOTA, INC.

Current Principal Place of Business:

P.O. BOX 50482
SARASOTA, FL 34232 US

New Principal Place of Business:

3116 53RD ST
SARASOTA, FL 34234 US

Current Mailing Address:

P.O. BOX 50482
SARASOTA, FL 34232 US

New Mailing Address:

FEI Number: 59-2062290

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, ROBERT L
1301 6TH AVE W
SUITE 600
BRADENTON, FL 34205 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: STD () Delete
Name: JACKSON, JANET M
Address: 3060 DIVIDING CREEK DR
City-St-Zip: SARASOTA, FL 34232

Title: D () Delete
Name: JOSEPH, RAMON
Address: 4400 GALLY AVE
City-St-Zip: ENGLEWOOD, FL 34223

Title: D () Delete
Name: HIGHTOWER, RUSSELL
Address: 3919 ELM STREET
City-St-Zip: ELLENTON, FL 34222

Title: D () Delete
Name: PROFFITT, GEORFREY H.
Address: 2105 SOUTH BRINK AVE.
City-St-Zip: SARASOTA, FL 34239

Title: D () Delete
Name: SCHROCK, ELIZABETH
Address: 202 SUNWAY AVE.
City-St-Zip: SARASOTA, FL 34237

Title: VP () Delete
Name: JOHNSON, ROSE
Address: 1604 ALDERMAN ST
City-St-Zip: SARASOTA, FL 34236

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: PINER, DEBRA
Address: 241 SUNTAN AVE
City-St-Zip: SARASOTA, FL 34237

Title: VP (X) Change () Addition
Name: HERNDON, DON
Address: 7677 39TH ST DR E
City-St-Zip: SARASOTA, FL 34243

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: JANET JACKSON

STD

03/27/2009

Electronic Signature of Signing Officer or Director

Date