## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Apr 27, 2007 8:00 am Secretary of State **DOCUMENT # N06000002168** 04-27-2007 90205 046 \*\*\*\*70.00 ALLIANCE FOR RESPONSIBLE TRANSPORTATION, INC. Principal Place of Business Mailing Address 1922 7TH STREET P.O.SARASOTA, FL 34236 **BOX 1741** SARASOTA, FL 34230 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04142007 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number Applied For <u> 71-0998384</u> Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NOUNE, ANDREW D 1922 7TH STREET Street Address (P.O. Box Number is Not Acceptable) SARASOTA, FL 34236 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE . Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Due by May 1, 2007 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE ☐ Delete TITLE P/T ■ Addition NOUNE, ANDREW D NAME NAME STREET ADDRESS **1922 7TH STREET** STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34236 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition MAFFETT, MARJORIE NAME NAME STREET ADDRESS **1555 7TH STREET** STREET ADDRESS CITY-ST-ZIP SARASOTA, FL. 34236 CITY-ST-ZIP TITLE Addition **₩** Delete ☐ Change NAME LASCHE, MICHAEL NAME STREET ADDRESS 8466 N. LOCKWOOD RIDGE, #108 STREET ADDRESS C/TY-ST-7IP SARASOTA, FL 34243 CITY-ST-7IP ☐ Delete TITLE TITLE Change O'CONNELL, ERIC NAME NAME 7th Street STREET ADDRESS 1555 &TH STREET STREET ADDRESS CITY-ST-ZIP SARASOTA, FL. 34236 CITY-ST-ZIP ☐ Delete TITLE Danielle Smith NAME NAME 5800 Bayshore Rd. Box 596 Sarasota, FL 34243 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE Addition Brandy Doyle 1922 74 Street NAME NAME STREET ADDRESS STREET ADDRESS 1922

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

Sacasota

SIGNATURE:

CITY-ST-ZIP

ED NAME OF SIGNING OFFICER OR DIRECTOR

FL 34236

**FILED**