

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # N06000002168

1. Entity Name
ALLIANCE FOR RESPONSIBLE TRANSPORTATION, INC.



Principal Place of Business
1922 7TH STREET
SARASOTA, FL 34236

Mailing Address
P.O.
BOX 1741
SARASOTA, FL 34230



01212008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
71-0998384

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

NOUNE, ANDREW D
1922 7TH STREET
SARASOTA, FL 34236

**DO NOT WRITE
IN THIS SPACE**

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 Andrew D. Nouné, President
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

1-21-08
DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	NOUNE, ANDREW D
STREET ADDRESS	1922 7TH STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	V
NAME	MAFFETT, MARJORIE
STREET ADDRESS	1555 7TH STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	D
NAME	O'CONNELL, ERIC
STREET ADDRESS	1555 7TH STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	S
NAME	SMITH, DANIELLE
STREET ADDRESS	5800 BAYSHORE RD. BOX 596
CITY-ST-ZIP	SARASOTA, FL 34243
TITLE	D
NAME	DOYLE, BRANDY
STREET ADDRESS	1922 7TH STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/29/08-80010-018 61.25

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IN THIS SPACE**

12. 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.

SIGNATURE:

Andrew D. Nouné
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-21-08 (941) 726-8800
Date Daytime Phone #