

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007719

FILED
Apr 30, 2009
Secretary of State

Entity Name: SARASOTA CHILDREN'S HOME, INC.

Current Principal Place of Business:

1670 MAIN STREET
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

PO BOX 3465
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 20-5272475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARVER, BENJAMIN
4119 KEATS DRIVE
SARASOTA, FL 34241 US

Name and Address of New Registered Agent:

BELLE, MICHAEL J ESQ.
2364 FRUITVILLE ROAD
SARASOTA, FL 34237 US

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: MICHAEL J. BELLE, ESQ.

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HILD, WILLIAM
Address: 1238 FRASER PINE BLVD.
City-St-Zip: SARASOTA, FL 34240

Title: VD () Delete
Name: CARVER, BENJAMIN
Address: 4419 KEATS DRIVE
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: BELLE, MICHAEL J ESQ.
Address: 2364 FRUITVILLE ROAD
City-St-Zip: SARASOTA, FL 34237

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: MICHAEL J. BELLE, ESQ.

VP,D

04/30/2009

Electronic Signature of Signing Officer or Director

Date