

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06820

FILED
Apr 19, 2007
Secretary of State

Entity Name: AMERICAN CULINARY FEDERATION-SARASOTA BAY CHEF'SASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 17434
SARASOTA, FL 34276

New Principal Place of Business:

4748 BENEVA ROAD
SARASOTA, FL 34276

Current Mailing Address:

PO BOX 17434
SARASOTA, FL 34276

New Mailing Address:

FEI Number: 59-2579017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, KENT J.
8075 SOUTH BENEVA ROAD
SUITE #6
SARASOTA, FL 33583 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: T () Delete
Name: BOWLIN, JEFF
Address: P.O. BOX 17434
City-St-Zip: SARASOTA, FL 34276

Title: PD () Delete
Name: KNECHT, BRIAN
Address: P.O. BOX 17434
City-St-Zip: SARASOTA, FL 34276

Title: TD (X) Delete
Name: SHODDARD, JOE
Address: P.O. BOX 17434
City-St-Zip: SARASOTA, FL 34276

Title: S () Delete
Name: GEARY, RICHARD
Address: P.O. BOX 17434
City-St-Zip: SARASOTA, FL 34276

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFREY BOWLIN

TRS

04/19/2007

Electronic Signature of Signing Officer or Director

Date