

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011541

FILED
Mar 26, 2009
Secretary of State

Entity Name: LAKE SARASOTA COMMUNITY GROUP INC.

Current Principal Place of Business:

6849 MAUNA LOA
SARASOTA, FL 34241

New Principal Place of Business:

<UNUSED>
SARASOTA, FL 34241

Current Mailing Address:

6849 MAUNA LOA
SARASOTA, FL 34241

New Mailing Address:

7108 JAVA DRIVE
SARASOTA, FL 34241

FEI Number: 26-1677553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLIS, JEFF
6849 MAUNA LOA
SARASOTA, FL 34241 US

Name and Address of New Registered Agent:

HIMES, ELLIE
7108 JAVA DR
SARASOTA, FL 34241 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: ELLIE HIMES

03/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: ELLIS, JEFF
Address: 6849 MAUNA LOA
City-St-Zip: SARASOTA, FL 34241

Title: D () Delete
Name: FARRINGTON, TISHA
Address: 6571 FRIENDSHIP
City-St-Zip: SARASOTA, FL 34241

Title: D () Delete
Name: JOHNSON, JUDY
Address: 6767 MAUNA LOA
City-St-Zip: SARASOTA, FL 34241

Title: T () Delete
Name: HIMES, ELLIE
Address: 7108 JAVA DR.
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: PITTS, BILL
Address: 4144 WESTMINSTER DR
City-St-Zip: SARASOTA, FL 34241

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 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: ELLIE HIMES

T

03/26/2009

Electronic Signature of Signing Officer or Director

Date