2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010445

FILED Jan 21, 2009 Secretary of State

Entity Name: ECONOMIC DEVELOPMENT FOUNDATION OF SARASOTA COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 2601 CATTLEMEN ROAD SUITE 201 SARASOTA, FL 34232 **New Mailing Address: Current Mailing Address:** 2601 CATTLEMEN ROAD SUITE 201 SARASOTA, FL 34232 FEI Number: 26-3730026 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MIDDLEBROOKS, J HUGH 200 S ORANGE AVENUE SARASOTA, FL 34236 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: STD () Delete () Change () Addition BARBERIO, ALLAN Name: Name: 2601 CATTLEMEN ROAD, SUITE 201 Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: Title: () Delete Title: () Change () Addition MEURS, BRIAN Name: Name: Address: 2601 CATTLEMEN ROAD, SUITE 201 Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: Title: () Delete Title: CHAI (X) Change () Addition MIDDLEBROOKS, J HUGH MIDDLEBROOKS, J HUGH Name: Name: 200 SOUTH ORANGE AVENUE Address: Address: 200 SOUTH ORANGE AVENUE City-St-Zip: SARASOTA, FL 34236 City-St-Zip: SARASOTA, FL 34236 Title: D () Delete Title: () Change () Addition Name: MIXSON, STEVE Name: 2601 CATTLEMEN ROAD, SUITE 201 Address: Address: SARASOTA, FL 34232 City-St-Zip: City-St-Zip: Title: CD () Delete Title: (X) Change () Addition PAPPAS, SARAH SWART, JOHN Name: Name: 2601 CATTLEMEN ROAD, SUITE 201 2601 CATTLEMEN ROAD, SUITE 201 Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232 Title: () Delete Title: () Change () Addition PICKHARDT, GEORGE Name: Name: Address: 2601 CATTLEMEN ROAD, SUITE 201 Address: SARASOTA, FL 34232 City-St-Zip: 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: KATHLEEN D. BAYLIS PRES 01/21/2009