

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000011013

FILED
Sep 27, 2010
Secretary of State

Entity Name: SARASOTA REGIONAL SOCIETY OF HEALTH-SYSTEM PHARMACISTS, INC.

Current Principal Place of Business:

1700 SOUTH TAMIAMI TRAIL
DEPT. OF PHARMACY
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

1700 SOUTH TAMIAMI TRAIL
DEPT. OF PHARMACY
SARASOTA, FL 34239

New Mailing Address:

FEI Number: 20-2819805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KISGEN, JAMIE
1700 SOUTH TAMIAMI TRAIL
DEPT. OF PHARMACY
SARASOTA, FL 34239 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: JAMIE KISGEN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: KISGEN, JAMIE
Address: 1700 SOUTH TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34239

Title: P
Name: STEWART, AMY
Address: 1700 SOUTH TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34239

Title: S
Name: STEVENSON, LAURA
Address: 5000 LAKEWOOD RANCH BLVD
City-St-Zip: BRADENTON, FL 34211

Title: T
Name: LEWIS, PAM
Address: 1700 SOUTH TAMIAMI TRAIL
City-St-Zip: SARASOTA, FL 34239

I hereby 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 all other like empowered.

SIGNATURE: JAMIE KISGEN

P

09/27/2010

Electronic Signature of Signing Officer or Director

Date