

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N09000011415

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** NETWORKERS OF SARASOTA INC

**Current Principal Place of Business:**

4481 ELEUTHERA CT  
SARASOTA, FL 34233

**New Principal Place of Business:**

**Current Mailing Address:**

4481 ELEUTHERA CT  
SARASOTA, FL 34233

**New Mailing Address:**

**FEI Number:** 27-1394147

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CIRILLO, SHARON M  
4481 ELEUTHERA CT  
SARASOTA, FL 34233 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:** SHARON CIRILLO

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CONK, SONDR  
**Address:** 2852 HARDEE DR.  
**City-St-Zip:** SARASOTA, FL 34231

**Title:** T  
**Name:** SHARON, CIRILLO  
**Address:** 4481 ELEUTHERA CT  
**City-St-Zip:** SARASOTA, FL 34233 US

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:** SHARON CIRILLO

T

01/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date