

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000012126

FILED  
Jan 26, 2011  
Secretary of State

Entity Name: SARASOTA MINDFULNESS INSTITUTE INC.

**Current Principal Place of Business:**

630 S ORANGE AVE  
102  
SARASOTA, FL 34236 US

**New Principal Place of Business:**

630 S ORANGE AVE  
201  
SARASOTA, FL 34236 US

**Current Mailing Address:**

PO BOX 15168  
SARASOTA, FL 34277 US

**New Mailing Address:**

FEI Number: 27-1459246      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NELSON, ELIZABETH A  
630 S ORANGE AVE  
102  
SARASOTA, FL 34236 US

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

NELSON, ELIZABETH A  
630 S ORANGE AVE  
201  
SARASOTA, FL 34236 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:

01/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NELSON, ELIZABETH A  
Address: 630 S ORANGE AVE  
City-St-Zip: SARASOTA, FL 34236 US

Title: VP  
Name: VAN DE STEEG, ANN  
Address: 2047 52ND AVE N  
City-St-Zip: ST PETERSBURG, FL 33714 US

Title: SEC  
Name: FULTON-ROSS, GALE  
Address: 5216 OCEAN BLVD SUITE B  
City-St-Zip: SARASOTA, FL 34242 US

Title: TREA  
Name: BROWN, MARTHA T  
Address: 1350 MAIN APT 709  
City-St-Zip: SARASOTA, FL 34236 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: ELIZABETH A. NELSON

P

01/26/2011

Electronic Signature of Signing Officer or Director

Date