

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11387

FILED  
Jan 10, 2006  
Secretary of State

**Entity Name:** MANA-SOTA LIGHTHOUSE FOR THE BLIND, INC.

**Current Principal Place of Business:**

7318 N. TAMIAMI TRAIL  
SARASOTA, FL 342438401

**New Principal Place of Business:**

**Current Mailing Address:**

7318 N. TAMIAMI TRAIL  
SARASOTA, FL 34243 US

**New Mailing Address:**

**FEI Number:** 59-2591136

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FELSKI, JANICE  
7318 N TAMIAMI TRIAL  
SARASOTA, FL 34243 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CRUIKSHANK, DAVID  
Address: PO BOX 9729  
City-St-Zip: BRADENTON, FL 34206

Title: ST ( ) Delete  
Name: HENDRY, BETTY  
Address: 770 SOUTH PALM AVENUE, #1101  
City-St-Zip: SARASOTA, FL 34236

Title: V ( ) Delete  
Name: REEVES, ANDY  
Address: 121 SHORELAND DRIVE  
City-St-Zip: OSPREY, FL 34229

Title: V (X) Delete  
Name: RUTKOWSKY, WALTER  
Address: 5005 MANATEE AVE WEST  
City-St-Zip: BRADENTON, FL 34209

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: REEVES, ANDY  
Address: 121 SHORELAND DRIVE  
City-St-Zip: OSPREY, FL 34229

Title: ST (X) Change ( ) Addition  
Name: APONTE, ALICIA  
Address: 4002 24TH AVE. WEST  
City-St-Zip: BRADENTON, FL 34205

Title: V (X) Change ( ) Addition  
Name: MCCALL, SANDRA  
Address: 6798 ARECA BLVD.  
City-St-Zip: SARASOTA, FL 34241

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDY REEVES

P

01/10/2006

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

\_\_\_\_\_  
Date