

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14324

FILED
Apr 25, 2006
Secretary of State

Entity Name: FOUNDERS CIRCLE OF SARASOTA, INC.

Current Principal Place of Business:

2300 MIETAW DR.
SARASOTA, FL 34239 US

New Principal Place of Business:

Current Mailing Address:

2300 MIETAW DR.
SARASOTA, FL 34239 US

New Mailing Address:

FEI Number: 59-2719585

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAVARY, JOHNSON S.
1671 S. DR.
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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: BAILEY, SARA
Address: 1387 HARBOR DRIVE
City-St-Zip: SARASOTA, FL 34229

Title: PD () Delete
Name: GODDARD, MARY BETH
Address: 8912 MISTY CREEK DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: VPD () Delete
Name: WATSON, JO
Address: 4846 KESTREL PARK CIRCLE
City-St-Zip: SARASOTA, FL 34231

Title: RSD () Delete
Name: EDELBLUTE, MARGARET
Address: 5280 EVERWOOD RUN
City-St-Zip: SARASOTA, FL 34235

Title: CSD () Delete
Name: ELLIOT, NITA
Address: 7920 BERGAMO
City-St-Zip: SARASOTA, FL 34238

Title: TD () Delete
Name: HILL, EMILY
Address: 2300 MIETAW DR
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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: EMILY HILL

TD

04/25/2006

Electronic Signature of Signing Officer or Director

Date