## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15683

FILED Jan 25, 2008 Secretary of State

Entity Name: CENTRAL OFFICE OF SARA-MANA, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1748 INDEPENDENCE BLVD. SUITE B-2 SARASOTA, FL 34234 **New Mailing Address: Current Mailing Address:** 1748 INDEPENDENCE BLVD. SUITE B-2 SARASOTA, FL 34234 US FEI Number: 59-2720456 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FERRARO, ANTHONY J 1748 INDEPENDENCE BLVD. SUITE B-2 SARASOTA, FL 34234 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition ( ) Delete MCGINLEY, RICH Name: MITCHELL, DOUGLAS Name: 823 QUEEN PALM Address: 3045 LOCKWOOD RIDGE LAKE CIRCLE Address: City-St-Zip: SARASOTA, FL 34243 City-St-Zip: SARASOTA, FL 34234 Title: ( ) Delete Title: (X) Change ( ) Addition DUNCAN, DENISE Name: ALBERS, KARL Name: Address: 16608 WATERLINE RD Address: 1138 CAMELLA CIRCLE City-St-Zip: BRADENTON, FL 34207 City-St-Zip: SARASOTA, FL 34243 Title: () Delete Title: () Change () Addition PARADO, SHIRLEY Name: Name: 7231 23RD AVE. EAST Address: Address: City-St-Zip: BRADENTON, FL 34208 City-St-Zip: ( ) Delete Title: Title: () Change () Addition SUTCLIFFE, GEORGE Name: Name: Address: 1001 CASEY KEY RD Address: City-St-Zip: NOKOMIS, FL 34275 City-St-Zip: Title: () Delete Title: () Change () Addition BOWMAN, BETSY Name: Name: 1532 FIRETHORN LAKES DR. Address: Address: City-St-Zip: SARASOTA, FL 34240 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition CALIENDO, AL GLEN, BEATY Name: Name: Address: 817 37TH STREET WEST Address: 8039 ROYAL BIRKDALE CIRCLE BRADENTON, FL 34205 LAKEWOOD RANCH, FL 34202 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: DOUGLAS MITCHELL MR 01/25/2008