2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2007 8:00 am
Secretary of State
01-23-2007 90019 014 ****61.25

DOCUMENT # N18336

1. Entity Name
SARASOTA-MANATEE CORNELL CLUB, INC.

Principal Place of Business	Mailing Address
315 DULMER DR. NOKOMIS, FL 34275 US	315 DULMER DR NOKOMIS, FL 34275 US

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01032007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-6196813
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PYLE, DAVID G.
315 DULMER DR.
NOKOMIS, FL 34275

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BILLINGS, JAMES R
STREET ADDRESS	400 GOLDEN GATE POINT, APT #12
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	TD
NAME	PYLE, DAVID
STREET ADDRESS	315 DULMER DR.
CITY-ST-ZIP	NOKOMIS, FL 34275
TITLE	SD
NAME	CUTLER, ROBERT
STREET ADDRESS	~~7917 ROYAL QUUENS LAND WAY~~ 6503 Moorings Point Circle #102
CITY-ST-ZIP	LAKEWOOD RANCH, FL 34202
TITLE	D
NAME	BOCK, DEAN
STREET ADDRESS	~~1304 N LAKE SHORE DR~~ 700 John Ringling Blvd
CITY-ST-ZIP	SARASOTA, FL ~~34231~~ 34236 #2201
TITLE	D
NAME	PYLE, JANE W
STREET ADDRESS	315 DULMER DR
CITY-ST-ZIP	NOKOMIS, FL 34275
TITLE	D
NAME	HANNAN, ELIZABETH
STREET ADDRESS	444 MONROE DR
CITY-ST-ZIP	SARASOTA, FL 34236

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David G. Pyle DAVID G. PYLE 1/20/07 941-488-8174
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #