

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2007 8:00 am
Secretary of State

01-31-2007 90045 040 ****61.25

DOCUMENT # N20848 1. Entity Name ST. ARMANDS CIRCLE ASSOCIATION, INC.					
Principal Place of Business 300 MADISON DR. SARASOTA, FL 34236-1328			Mailing Address 300 MADISON DR. SARASOTA, FL 34236-1328		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1701241	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RIDDEL, JEFFERSON F. 720 SOUTH ORANGE AVENUE SARASOTA, FL 33577			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PEFFLEY, JACK 300 HADISON DR. SARASOTA, FL 34236	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SEACE, ERIC 364 ST. ARMANDS CIRCLE SARASOTA, FL 34236	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PP HOYT, MAUREEN 300 MADISON DR. SARASOTA, FL 34236	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ED CORRIGAN, DIANA 300 MADISON DR. SARASOTA, FL 34236	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S EAGAN, JOY 465 A JOHN RINGLING BLVD SARASOTA, FL 34236	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1V MATERESE, MARIE 300 MADISON DR SARASOTA, FL 34236	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Cheryl Whitten 300 Madison Dr. Sarasota, FL 34236	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
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 an other duly empowered.					
SIGNATURE: X <i>David M. [Signature]</i> Exec. Director X 1/29/07 X (941) 388-1534 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

40007400



01172007 Chg-NP CR2E037 (12/06)

ATTACHMENT

Continuation of Officers and Directors

40007485
N20848

Title	2 nd V
Name	William Carman
Street Address	300 Madison Dr.
City-ST-Zip	Sarasota, FL 34236