2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

5/13/2005-90225-009-$8.75-$8.75

DOCUMENT # N23143

1. Entity Name

SARA MANA ANTIQUE DEALERS ASSOCIATION, INC.

FILED
05 JUN 10 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1st MOORE CR2E037 (10/04)

Principal Place of Business	Mailing Address
4760 CALUMENT AVE SARASOTA FL 34234 US	4760 CALUMENT AVE SARASOTA FL 34234 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number NO-T APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LEWIS, JUNE
4760 CALUMET AVE
SARASOTA FL 34234

7. Name and Address of New Registered Agent

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

FILE NOW: FEE IS $61.25
Due By May 1, 2005

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	P CLARK, DONALD 4326 74TH AVENUE SARASOTA FL 34243	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CAROL REESE PRESIDENT 3030 HATTON ST SARASOTA FL 34237 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SLADCIK, KATHY PO BOX 10643 BRADENTON FL 34207	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BARBARA COONEY CORR. SECRETARY 729 INDIAN BEACH CIRCLE SARASOTA FL 34234 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOHR, MICKY 2230 SUNNYSIDE LN SARASOTA FL 34239	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	LOIS AGRIESTI RECORDING SECRETARY 2907 ROBINSON AVE SARASOTA FL 34232 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LEWIS, JUNE 4760 CALUMET AVE SARASOTA FL 34234	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	KEN DAVIDSON V. PRES. 1634 UNIVERSITY PKWY SARASOTA FL 34243 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SHURTLEFF, DWIGHT 7526 4TH AVE W BRADENTON FL 34209	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: June McGinnis Treasurer 5/4/05 (941)351-1324
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #