

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N34326

1. Entity Name

YANA FOUNDATION OF SARASOTA, INC.

FILED
Mar 26, 2001 8:00 am
Secretary of State

03-26-2001 90140 047 ****70.00

Principal Place of Business

501 N BENEVA RD
SUITE 660
SARASOTA FL 34232
US

Mailing Address

501 N. BENEVA RD
SUITE 660
SARASOTA FL 34232
US

2. Principal Place of Business

4030 Sawyer Ct.
Suite, Apt. #, etc.
Sarasota, FL

3. Mailing Address

4030 Sawyer Ct.
Suite, Apt. #, etc.
Sarasota, FL

City & State

City & State

4. FEI Number

59-2976471

Applied For

Not Applicable

Zip
34233

Country
U.S.A.

Zip
34233

Country
U.S.A.

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MC KEAN, PAUL L ESQ
3671 WEBBER ST #B
SARASOTA FL 34232

7. Name and Address of New Registered Agent

Name Sue Jacobson
Street Address (P.O. Box Number is Not Acceptable)
46 N. Washington Blvd.
Suite #1
City Sarasota FL Zip Code 34236

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.

SIGNATURE Sue Jacobson

Sue Jacobson

3/23/01

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FOX, W R 1819 MAIN ST SARASOTA FL 34230	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAZARUS, MARC 1700 S TAMiami TRAIL SARASOTA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CARSON, DUDLEY 5200 OCEAN BLVD. SARASOTA FL 34242	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DEVEREAUX, WILLIAM 4312 MIDLAND SARASOTA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LECHER, MIRIAM 1625 S OSPREY AVE SARASOTA FL 34236	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCABE, PAT 1462 4TH ST SARASOTA FL 34236	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President William Stewart 538 Bearded Oak Cir. Sarasota, FL 34232	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer S. Dudley Carson, GRI, CRB 5200 Ocean Blvd. Sarasota, FL 34242	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Director William F. Devereaux, Sr. 4312 Midland Sarasota, FL 34231	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

William F. Devereaux, Sr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/25/01 941-922-9837

CR2E037 (10/00)