

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90007 008 ****70.00

DOCUMENT # N34326

1. Entity Name

YANA FOUNDATION OF SARASOTA, INC.

Principal Place of Business

Mailing Address

**4030 SAWYER COURT
SARASOTA FL 34233
US**

**4030 SAWYER COURT
SARASOTA FL 34233
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 **59-2976471**

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JACOBSON, SUE
46 N WASHINGTON BLVD
STE #1
SARASOTA FL 34236**

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.

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** ☐ Delete
NAME **STEWART, WILLIAM**
STREET ADDRESS **538 BEARDED OAK CIRCLE**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **D** ☐ Change ☒ Addition
NAME **John B. Cunningham**
STREET ADDRESS **1 North Tuttle Ave**
CITY-ST-ZIP **SARASOTA FL 34237**

TITLE **P** ☐ Delete
NAME **LAZARUS, MARC**
STREET ADDRESS **1700 S TAMiami TRAIL**
CITY-ST-ZIP **SARASOTA FL**

TITLE **D** ☐ Change ☒ Addition
NAME **Jeffery C. Anglin**
STREET ADDRESS **1401 14th Street W.**
CITY-ST-ZIP **BRADENTON, FL 34205**

TITLE **T** ☐ Delete
NAME **CARSON, S. DUDLEY GRI**
STREET ADDRESS **5200 OCEAN BLVD**
CITY-ST-ZIP **SARASOTA FL 34242**

TITLE **D** ☐ Change ☒ Addition
NAME **JORDAN WALLACH**
STREET ADDRESS **1800 Second Street #900**
CITY-ST-ZIP **SARASOTA, FL 34236**

TITLE **ED** ☐ Delete
NAME **DEVEREAUX, WILLIAM F SR**
STREET ADDRESS **4312 MIDLAND**
CITY-ST-ZIP **SARASOTA FL 34231**

TITLE **D** ☐ Change ☒ Addition
NAME **DANIEL McLoone**
STREET ADDRESS **8282 Shadow Pine Way**
CITY-ST-ZIP **SARASOTA, FL 34238**

TITLE **D** ☒ Delete
NAME **LECHER, MIRIAM**
STREET ADDRESS **1625 S OSPREY AVE**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **D** ☐ Change ☒ Addition
NAME **WALTER HARABURDA**
STREET ADDRESS **627 OSPREY AVE.**
CITY-ST-ZIP **SARASOTA, FL 34236**

TITLE **D** ☐ Delete
NAME **MCABE, PAT**
STREET ADDRESS **1462 4TH ST**
CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **D** ☐ Change ☒ Addition
NAME **S.H. (Johnny) Jahn**
STREET ADDRESS **3947 Mockingbird Hill**
CITY-ST-ZIP **SARASOTA FL 34232**

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*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date **2/20/12** Daytime Phone # **941-922-8927**

CR2E037 (9/01)