2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2011
Secretary of State

DOCUMENT# N34481

Entity Name: THE FAMILY NETWORK ON DISABILITIES OF MANATEE/SARASOTA, INC.

Current Principal Place of Business:

6215 LORRAINE ROAD
BRADENTON, FL 34202

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 110025
BRADENTON, FL 34211

New Mailing Address:

FEI Number: 65-0156905 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SMITH, MARY J ED
26013 81ST DRIVE EAST
MYAKKA CITY, FL 34251 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TD
Name: ROSS, KIM
Address: 5310 GARDENS DR.
City-St-Zip: SARASOTA, FL 34243 US

Title: SD
Name: KIM, WILLIAMS
Address: 2120 E VINA DEL MAR BLVD
City-St-Zip: ST PETE BEACH, FL 33706 US

Title: PD
Name: O'MEARA, JODI
Address: 4329 KINGSFIELD DRIVE
City-St-Zip: PARRISH, FL 34219 US

Title: VD
Name: DEBBIE, SMITH
Address: 2045 MISTY SUNRISE TRAIL
City-St-Zip: SARASOTA, FL 34240 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARY J SMITH ED 02/15/2011

Electronic Signature of Signing Officer or Director — Date