

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2008 08:00 AM
Secretary of State

DOCUMENT # N36721

1. Entity Name

SARASOTA AREA SOFTBALL ASSOCIATION, INC.



Principal Place of Business

15 PARADISE
BOX 340
SARASOTA FL 34239

Mailing Address

15 PARADISE
BOX 340
SARASOTA FL 34239



2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

65-0168151

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUTTON, JACK V
2967 LOUISE ST
SARASOTA FL 34237

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 re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

TITLE DP ☐ Delete
NAME BUTTON, JACK V.
STREET ADDRESS 2967 LOUISE STREET
CITY-ST-ZIP SARASOTA FL

TITLE VD ☐ Delete
NAME WACHA, JAMES
STREET ADDRESS 4222 GROVELAND AVENUE
CITY-ST-ZIP SARASOTA FL 34239

TITLE VD ☐ Delete
NAME BIXLER, DAVID M
STREET ADDRESS 7318 PALOMINO PLACE
CITY-ST-ZIP SARASOTA FL 34241

TITLE TD ☐ Delete
NAME SUTTON, ROGER
STREET ADDRESS 1872 WOOD HOLLOW CIRCLE
CITY-ST-ZIP SARASOTA FL

TITLE SD ☐ Delete
NAME BURDEN, GREG
STREET ADDRESS 4168 MOLOKAI DRIVE
CITY-ST-ZIP SARASOTA FL 34241

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 all other like empowered.

SIGNATURE: Roger Sutton

Roger Sutton

4-30-08