

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36721

FILED
Apr 27, 2009
Secretary of State

Entity Name: SARASOTA AREA SOFTBALL ASSOCIATION, INC.

Current Principal Place of Business:

15 PARADISE
BOX 340
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

15 PARADISE
BOX 340
SARASOTA, FL 34239

New Mailing Address:

FEI Number: 65-0168151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTTON, JACK V
2967 LOUISE ST
SARASOTA, FL 34237 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: DP () Delete
Name: BUTTON, JACK V.
Address: 2967 LOUISE STREET
City-St-Zip: SARASOTA, FL

Title: VD () Delete
Name: WACHA, JAMES
Address: 4222 GROVELAND AVENUE
City-St-Zip: SARASOTA, FL 34239

Title: VD () Delete
Name: BIXLER, DAVID M
Address: 7318 PALOMINO PLACE
City-St-Zip: SARASOTA, FL 34241

Title: TD () Delete
Name: SUTTON, ROGER
Address: 1872 WOOD HOLLOW CIRCLE
City-St-Zip: SARASOTA, FL

Title: SD (X) Delete
Name: BURDEN, GREG
Address: 4168 MOLOKAI DRIVE
City-St-Zip: SARASOTA, FL 34241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: WACHA, JAMES
Address: 4222 GROVELAND AVENUE
City-St-Zip: SARASOTA, FL 34231

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: BURDEN, GREG
Address: 4168 MOLOKAI DRIVE
City-St-Zip: SARASOTA, FL 34241

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES WACHA

VD

04/27/2009

Electronic Signature of Signing Officer or Director

Date