

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Jan 30, 2004 8:00 am**  
**Secretary of State**

01-30-2004 90084 023 \*\*\*\*61.25

**DOCUMENT # N44054**

1. Entity Name

A BOND OF LOVE ADOPTION AGENCY, INC.



Principal Place of Business

1800 SIESTA DR  
SARASOTA FL 34239  
US

Mailing Address

1800 SIESTA DR  
SARASOTA FL 34239  
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

65-0307813

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

STOCKHAM, SUSAN L.  
1126 TARA VISTA  
SARASOTA FL 34232

7. Name and Address of New Registered Agent

Name

Susan L. Stockham

Street Address (P.O. Box Number is Not Acceptable)

6775 Timberland Lane

City

Sarasota

FL

Zip Code

34241

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 reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

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 D  
NAME SUZANNE, MARTIN ☐ Delete  
STREET ADDRESS 1800 SIESTA DR  
CITY-ST-ZIP SARASOTA FL 34239

TITLE TD  
NAME SINGLETON, LINDA ☐ Delete  
STREET ADDRESS 4619 SANDPINE LN  
CITY-ST-ZIP SARASOTA FL 34241

TITLE SD  
NAME SIMS, CECIL ☐ Delete  
STREET ADDRESS 810 OAK PONG DR.  
CITY-ST-ZIP OSPREY FL 34229

TITLE D  
NAME HESTER, JACKIE ☐ Delete  
STREET ADDRESS 3233 SECLUSION  
CITY-ST-ZIP SARASOTA FL 34239

TITLE D  
NAME MILLER, KEN ☐ Delete  
STREET ADDRESS 7605 RICHARDSON RD  
CITY-ST-ZIP SARASOTA FL

TITLE P  
NAME MARTIN, SUZANNE ☐ Delete  
STREET ADDRESS 933 NOKOMIS AVE.  
CITY-ST-ZIP VENICE FL 34285

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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STREET ADDRESS  
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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Suzanne Martin*

1-22-04

941-957-0064