

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 11, 2006 8:00 am
Secretary of State

04-11-2006 90118 003 ****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

1st MOORE

CR2E037 (10/05)

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

7. Name and Address of New Registered Agent

STOCKHAM, SUSAN L.
6775 TIMBERLAND LANE
SARASOTA FL 34241

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 reinstating)

DATE

FILE NOW: FEE IS \$61.25

Due By May 1, 2006

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

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

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

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

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

TITLE P ☒ Delete
NAME MARTIN, SUZANNE
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 TD ☐ Change ☒ Addition
NAME Cavanaugh, Susan
STREET ADDRESS 7152 Saddle Creek Circle
CITY-ST-ZIP SARASOTA, FL 34241

TITLE SD ☐ Change ☒ Addition
NAME Siringer, Tara
STREET ADDRESS 1189 Vermeer Dr.
CITY-ST-ZIP Nokomis, FL 34275

TITLE C ☐ Change ☐ Addition
NAME Hester, Jackie
STREET ADDRESS 1708 Flower Dr.
CITY-ST-ZIP SARASOTA, FL 34239

TITLE D ☐ Change ☒ Addition
NAME Winsler, Christine
STREET ADDRESS 7241 Firethorne Dr.
CITY-ST-ZIP SARASOTA, FL 34240

TITLE D ☐ Change ☒ Addition
NAME Vale, Karen
STREET ADDRESS 471 Park Trace Blvd.
CITY-ST-ZIP OSPREY, FL 34229

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #