

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44106

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: MYAKKA CONSERVANCY, INC.

## Current Principal Place of Business:

1990 MAIN STREET, #801  
SARASOTA, FL 34236 US

## New Principal Place of Business:

## Current Mailing Address:

1990 MAIN STREET, #801  
SARASOTA, FL 34236 US

## New Mailing Address:

FEI Number: 65-0307483

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORRIS, JULIE  
4535 45TH CT  
SARASOTA, FL 34234 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: DS ( ) Delete  
Name: MORRIS JULIE,  
Address: 4535 45TH CT  
City-St-Zip: SARASOTA, FL 34234

Title: D ( ) Delete  
Name: WHELAN, JACK  
Address: 1325 QUAIL DR  
City-St-Zip: SARASOTA, FL 34241

Title: D ( ) Delete  
Name: ESTEVEZ, EERNEST D,  
Address: 1600 THOMPSON PARKWAY  
City-St-Zip: SARASOTA, FL 34236

Title: TD ( ) Delete  
Name: GRUNDY, SUSAN  
Address: 3221 TOBERO LN  
City-St-Zip: SARASOTA, FL 34235

Title: VP ( ) Delete  
Name: STRICKLAND, RENEE  
Address: 24615 OAK KNOLL RD  
City-St-Zip: MYAKKA CITY, FL 34251

Title: PD ( ) Delete  
Name: WILKINSON, DENNIS B  
Address: 315 25TH ST W  
City-St-Zip: BRADENTON, FL 34205

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: SUSAN GRUNDY

TREA

03/31/2009

Electronic Signature of Signing Officer or Director

Date