

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90191 019 ****61.75

DOCUMENT # N44330

1. Entity Name
**SARASOTA*MANATEE CHAPTER OF THE ASSOCIATION
OF LEGAL ADMINISTRATORS, INC.**



Principal Place of Business
**1750 RINGLING BLVD
SARASOTA, FL 34236 US**

Mailing Address
**P.O.BOX 48616
SARASOTA, FL 34230 US**

50036532



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03072005

Chg-NP

CR2E037 (10/03)

4. FEI Number
65-0271301

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

**LITTLE, LOUISE
1001 AVENIDA DEL CIRCO
VENICE, FL 34292**

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

Filing Fee is \$61.25
Due by May 1, 2005

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 PD ☒ Delete
NAME VIRGINIA, HALE S
STREET ADDRESS 7101 S. TAMIAMI TR. STE. A
CITY-ST-ZIP SARASOTA, FL 34231

TITLE VD ☐ Delete
NAME KING, SANDRA
STREET ADDRESS 1819 MAIN ST. STE610
CITY-ST-ZIP SARASOTA, FL 34236

TITLE SD ☒ Delete
NAME MOWRY, JENNIFER
STREET ADDRESS 46 N. WASHINGTON BLVD., SUITE 21
CITY-ST-ZIP SARASOTA, FL 34236

TITLE TD ☒ Delete
NAME LITTLE, LOUISE
STREET ADDRESS 1001 AVENIDA DEL CIRCO
CITY-ST-ZIP VENICE, FL 34292

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 PD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Change ☒ Addition
NAME Michelle Cherp
STREET ADDRESS 1432 First Street
CITY-ST-ZIP Sarasota, FL 34236

TITLE TD ☐ Change ☒ Addition
NAME Gary Parker
STREET ADDRESS 401 N. Cattleman Rd., Suite 305
CITY-ST-ZIP Sarasota, FL 34232

TITLE VD ☐ Change ☒ Addition
NAME Todd Rains
STREET ADDRESS 240 S. Pineapple Ave.
CITY-ST-ZIP Sarasota, FL 34236

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)

Sandra King

Date

Daytime Phone #