


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008 08:00 AM
Secretary of State


DOCUMENT # N48677
 1. Entity Name
KIWANIS CLUB OF SARASOTA SUNRISE FOUNDATION, INC.



Principal Place of Business
**5928 21ST ST E
 BRADENTON, FL 34203 US**

Mailing Address
**PO BOX 78
 ONECO, FL 34264-0078 US**

DO NOT WRITE IN THIS SPACE



03042008 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0343172	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ANDERSON, MARK M
 5928 21ST ST E
 BRADENTON, FL 34203**

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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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

**Filing Fee is \$61.25
 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

00000854247
 03/26/08-80100-021 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANDERSON, MARK 1617 STANFORD LANE SARASOTA, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	YD DELGADO, BARBARA 2120 CRAFT LANE SARASOTA, FL 34239
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BOOTH, JACQUELINE 6821 CORRAL CIRCLE SARASOTA, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Mark M. Anderson **MARK M ANDERSON** 3/5/8 941-755-5244
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #