

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N49787 (7)

1. Corporation Name

RELEAF SARASOTA COUNTY, INC.



Principal Place of Business

**2620 GRAFTON ROAD
SARASOTA FL 34231**

Mailing Address

**2620 GRAFTON ROAD
SARASOTA FL 34231**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**ALTIER, STEPHEN R
2123 PHILLIPPI STREET
SUITE 212
SARASOTA FL 34231**

3. Date Incorporated or Qualified

07/06/1992

3a. Date of Last Report

02/28/1995

4. FEI Number

65-0343776

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81

Name

82

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

83

84

City

FL

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**PD
MALOFF, ELLEN
2620 GRAFTON ROAD
SARASOTA FL 34231-5110**

TITLE ☐ DELETE

**D
EDWARDS, CHARLES
2244 HARBOUR CT. DR.
LONGBOAT KEY FL**

TITLE ☐ DELETE

**DT
ALTIER, STEPHEN R
2123 PHILLIPPI STREET
SARASOTA FL**

TITLE ☒ DELETE

**D
BUTLER, KATHERINE
110 FAUBEL STREET
SARASOTA FL**

TITLE ☐ DELETE

**D
ROBERTS, BETSY
3227 ASHTON RD
SRASOTA FL**

TITLE ☐ DELETE

**NAME
STREET ADDRESS
CITY-ST-ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

**D
HARRIS SENAC, LESLIE
3221 WILLIAMS BURG ST.
SARASOTA, FL 34231**

2.1 TITLE ☐ Change ☒ Addition

**D
TEPPER, ARTHUR L.
2055 WOOD ST., SUITE 120
SARASOTA, FL 34237**

3.1 TITLE ☐ Change ☐ Addition

**3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP**

4.1 TITLE ☐ Change ☐ Addition

**4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP**

5.1 TITLE ☐ Change ☐ Addition

**5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP**

6.1 TITLE ☐ Change ☐ Addition

**6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 4/15/96X 941 9223693

Date

Daytime Phone #

CP2E037 (12/95)