

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N49787

**FILED**  
**Mar 13, 2011**  
**Secretary of State**

**Entity Name:** RELEAF SARASOTA COUNTY, INC.

**Current Principal Place of Business:**

2620 GRAFTON STREET  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

2620 GRAFTON STREET  
SARASOTA, FL 34231

**New Mailing Address:**

**FEI Number:** 65-0343776

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBERTS, BETSY  
3227 ASHTON RD.  
SARASOTA, FL 34231 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:** PED  
**Name:** MALOFF, ELLEN  
**Address:** 2620 GRAFTON ROAD  
**City-St-Zip:** SARASOTA, FL 342315110

**Title:** D  
**Name:** HARRIS SENAC, LESLIE  
**Address:** 5583 BLOUNT AVE  
**City-St-Zip:** SARASOTA, FL 34231

**Title:** D  
**Name:** ROBERTS, BETSY  
**Address:** 3227 ASHTON RD  
**City-St-Zip:** SRASOTA, FL

**Title:** D  
**Name:** MEKSRAITIS, JUDY  
**Address:** 3336 THORNWOOD RD.  
**City-St-Zip:** SARASOTA, FL 34231

I hereby 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 all other like empowered.

**SIGNATURE:** ELLEN MALOFF

PED

03/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date