2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **N93000000975** Apr 22, 2000 8:00 am Secretary of State 1. Entity Name THE WOMENS LEGAL FUND OF SARASOTA COUNTY, INC. 04-22-2000 90100 014 ****61.25 Principal Place of Business Mailing Address 4370 S TAMIAMI TRAIL 4370 S TAMIAMI TRAIL SARASOTA FL 34231-3412 SARASOTA FL 34231 2. Principal Place of Business 1750 - 17th St. 3. Mailing Address 1750 - 17th St. Suite Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 65-0415147 Sarasota. Sarasota, Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 34234 34234 Fee Required Sarasota Sarasota 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Gompertz Street Address (P.O. Box Number is Not Acceptable) 1975 Gulf of Mexico Dr. BELKNAP, SHELIA #307 1644 HATHORNE ST SARASOTA FL 34239 Longboat Key 34228 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. 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change **X** Addition TITLE TITLE Delete ĞŎMPERTZ, LEILA SHAFFNER, KATHLEEN NAME NAME STREET ADDRESS 624 N OWL DR STREET ADDRESS 1975 Gulf of Mexico Dr. #307 CITY-ST-ZIP CITY-ST-ZIP Longboat Key, FL SARASOTA FL ☐ Addition Change Delete TITLE TITLE VPD NAME MILLER, JAN NAME STREET ADDRESS STREET ADDRESS 3205 SOUTH GATE CIR CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL Addition ☐ Change Delete TITLE TITLE TD TD NAME Knuth. Robin K G WELTMAN, GLADYS NAME STREET ADDRESS STREET ADDRESS 1858 RINGLING BLVD. 6739 Friendship Dr. CITY-ST-ZIP CITY-ST-7IP SARASOTA FL 34236 Sarasota, FL 34241 ☐ Change ☐ Addition SD TITLE TITLE ☐ Delete BATES, DR MARGARET L. NAME NAME STREET ADDRESS 700 JOHN RINGLING BLVD. STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP SARASOTA FL 34236 ☐ Addition ☐ Change TITLE Delete TITLE RUSSELL, JEAN G NAME NAME STREET ADDRESS STREET ADDRESS 1756 KESTRAL PARK DR CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34231 ☐ Addition TITLE □ Delete TITLE □ Change SUTTON JEAN. NAME NAME STREET ADDRESS STREET ADDRESS 3276 BRUNSWICK LN CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 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: SOCIALITY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/00

941-951-1336

Daytime Phone #