

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

DOCUMENT # N93000004562

1. Entity Name

SAVE ANNA MARIA, INC.



**FILED
Mar 24, 2006 8:00 am
Secretary of State**

03-24-2006 90038 022 ****61.25



1st MOORE CR2E037 (10/05)

Principal Place of Business 1203 GULF DR., N. #400 BRADENTON BEACH FL 34217 US	Mailing Address P.O. BOX 906 ANNA MARIE FL 34216
2. Principal Place of Business 3602 6th Avenue, Apt. A Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State Holmes Beach, FL Zip 34217	City & State Zip Country USA
6. Name and Address of Current Registered Agent BUNNY L. GARST 609 NORTH BAY BLVD(2115 ANNA MARIA FL 34216	

4. FEI Number
65-0440793 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

Name
Jay Hill

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

304 Hardin Avenue

(P.O. Box 516)

City
Anna Maria, FL Zip Code
34216

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 changing)

3/9/06

FILE NOW FEE IS \$61.25
Due By May 1, 2006

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

		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PIEROLA, CATHERINE K		NAME	Sheila Hurst
STREET ADDRESS	1203 GULF DR. N. #400		STREET ADDRESS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY-ST-ZIP	BRADENTON BEACH FL 34217		CITY-ST-ZIP	3602 6th Ave., Apt. A Holmes Beach, FL 34217
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PERRY, JOAN		NAME	Jay Hill
STREET ADDRESS	507 74TH ST.		STREET ADDRESS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY-ST-ZIP	BRADENTON BEACH FL 34217		CITY-ST-ZIP	304 Hardin Ave. Anna Maria, FL 34216
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MESAROS, SHERRY		NAME	Nancy Deal
STREET ADDRESS	307 57TH ST.		STREET ADDRESS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY-ST-ZIP	HOLMES BEACH FL 34217		CITY-ST-ZIP	203 56th Street Holmes Beach, FL 34217
TITLE	TSD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MESAROS, SHERRY		NAME	Billie Martini
STREET ADDRESS	307 57TH ST.		STREET ADDRESS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY-ST-ZIP	BRADENTON BEACH FL 34217		CITY-ST-ZIP	212 67th Street Holmes Beach, FL 34217
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME	
STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP			CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 empowerments.

SIGNATURE

Jay Hill, V.P. 3/09/06 941-778-4745