


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 8:00 am**  
**Secretary of State**

01-17-2006 90230 011 \*\*\*\*70.00

<b>DOCUMENT # N93000005300</b>					
1. Entity Name SARASOTA COUNTY OPENLY PLANS FOR EXCELLENCE (SCOPE), INC.					
Principal Place of Business 1226 N. TAMIAMI TRAIL SUITE 202 SARASOTA, FL 34236 US			Mailing Address 1226 N. TAMIAMI TRAIL SUITE 202 SARASOTA, FL 34236 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
DUTTON, TIM 1226 N TAMIAMI TRAIL SUITE 202 SARASOTA, FL 34236				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL	Zip Code
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	SD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROUCHER, NANCY			NAME	
STREET ADDRESS	842 MANGROVE POINT RD			STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 34242			CITY-ST-ZIP	
TITLE	TD	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANE, ROBERT			NAME	
STREET ADDRESS	8430 ENTERPRISE CIR., STE 120			STREET ADDRESS	
CITY-ST-ZIP	BRADENTON, FL 34202			CITY-ST-ZIP	
TITLE	C	<input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PAPPAS, SARAH			NAME	<i>C JANICE MEE</i>
STREET ADDRESS	5840 26TH STREET WEST			STREET ADDRESS	<i>1701 CLOWER CREEK DR</i>
CITY-ST-ZIP	BRADENTON, FL 34207			CITY-ST-ZIP	<i>SARASOTA, FL 34231</i>
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DUTTON, TIM			NAME	
STREET ADDRESS	1226 N TAMIAMI TRAIL, STE. 202			STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 34236			CITY-ST-ZIP	
TITLE	VC	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCOTT, SUSAN			NAME	
STREET ADDRESS	1660 RINGLING BLVD			STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 34236			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 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: <i>Tim Dutton</i>		Date: <i>1.10.06</i>		Daytime Phone #: <i>941.365-875.</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	



01052006 Chg-NP CR2E037 (11/05)

4. FEI Number **65-0459837** Applied For  Not Applicable

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