2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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

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DOCUMENT # N9300005300 1. Entity Name SARASOTA COUNTY OPENLY PLANS FOR EXCELLENCE (SCOPE), INC.							01-17-2006 90230 011 ****70.00						0.00
Principal Place 1226 N. TAM SUITE 202 SARASOTA, F	MIAMI TRAIL	US	1226 Suite	Address N. TAMIAMI TRAII 202 SOTA, FL 34236	L US		·						
2. Principal Place of Business			3. Maili	3. Mailing Address									
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.				01052006	Chg-NP	CR2E	037 (1	<u> </u>	
City & State			City	City & State			05 0450007			-	plied For t Applicable		
Zip		Country	Zip		Соц	intry		5. Certificate	of Status Desir	ed 🔽		75 Add Require	
	6. Name	and Address of Current	Registere	d Agent				7. Name and	Address of N	ew Registere	d Agent	t	
DUTTON, TIM					Name Street Address			B.O. Pov Numbe	r in Not Aggre	table)			
1226 N TA SUITE 202	2				Street Address (ir is Not Accep			_	
SARASOT	A, FL 342	236				City	<u> </u>			F	Z Z	ip Code	8
	named entit tions of regist	y submits this statement for tered agent.	or the purpo	ose of changing its	registere	ed office o	r register	ed agent, or bot	h, in the State			ar with,	and accept
SIGNATURE .		or printed name of registered agent	and title if appl	icable. (NOTE	: Registere	d Agent signs	ture required	when reinstating)		DAT	E	_	
	Signature, typed	or printed name of registered agent the Is \$61.25 May 1, 2006	and title if appl	9. Election Can Trust Fund C	npaign F	inancing	ture required	\$5.00 May Bradded to Fees	е	DAT Make che Florida Dep	eck pay		
	Signature, typed	ee is \$61.25 May 1, 2006		9. Election Can	npaign F	inancing		\$5.00 May B Added to Fees		Make che Florida Dep	eck pay partmen	nt of S1	tate
10. TITLE NAME STREET ADDRESS	Filing Fe Due by M SD ROUCHE 842 MAN	or Is \$61.25 May 1, 2006 OFFICERS AND DI		9. Election Can	npaign F Contributi 11. TITLE NAMI	inancing ion.		\$5.00 May B		Make che Florida Dep	eck pay partmen	nt of S1	tate
10. TITLE NAME	SIGNATURE, NYPERING FOR DUE BY MENTER SARASO TO LANE, RC 8430 ENT	ore Is \$61.25 May 1, 2006 OFFICERS AND DIE OFF	RECTORS	9. Election Can Trust Fund C	11. TITLE NAM STRE CITY TITLE NAM STRE	Financing ion. E E E E T T T T T T T T T T T T T T T		\$5.00 May B Added to Fees		Make che Florida Dep	oartmen	ORS IN	10
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	SIGNATURE, NYPERING SERVICE STATE ST	OFFICERS AND DIE OFFICERS AND DIE OFFI OFFI OFFI OFFI OFFI OFFI OFFI OF	RECTORS	9. Election Can Trust Fund C	11. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	E E E E E E E E E E E E E E E E E E E	C JAN 170	\$5.00 May B Added to Fees ADDITIONS/CH/	ANGES TO OF	Make che Florida Dep FICERS AND	eck pay partmen DIRECT	ORS IN	tate 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	SIGNATURE, NOPED FILING FOR DUE by N SD ROUCHE 842 MAN'S ARASO TD LANE, RO 8430 ENT BRADEN' C PAPPAS, 5840 26T BRADEN' D DUTTON 1226 N T.	OFFICERS AND DIE OFFICERS AND DIE R, NANCY GROVE POINT RD TA, FL 34242 DBERT TERPRISE CIR., STE 1 TON, FL 34202 SARAH H STREET WEST TON, FL 34207	RECTORS	9. Election Can Trust Fund C	ITLE NAM STRE CITY TITLE NAM STRE CITY	E E E E E ADDRESS - ST-ZIP E E E E E E E ADDRESS - ST-ZIP E E E - ST-ZIP E E E E E E E E E E E E E E E E E E E	C JAN 170	\$5.00 May B Added to Fees ADDITIONS/CHA	ANGES TO OF	Make che Florida Dep FICERS AND	DIRECT	ORS IN Change Change	10 Addition
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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.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.10.06

Date

941.365-875

Daytime Phone #