

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

06 OCT 12 PM 3: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000002075	
1. Entity Name SARASOTA FLORIDA ASSOCIATION FOR WOMEN LAWYERS, INC.	



Principal Place of Business 5250 17TH ST SUITE B SARASOTA, FL 34235	Mailing Address C/O MARJORIE SCHMOYER 1800 SECOND ST., STE 700 SARASOTA, FL 34236
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2. Principal Place of Business 1990 Main Street	3. Mailing Address c/o Rebecca Proctor
Suite, Apt. #, etc. Suite 700	Suite, Apt. #, etc. PO Box 3948
City & State Sarasota FL	City & State Sarasota FL
Zip 34236	Country USA

REINSTATEMENT 06



10052006 REIN-NP CR2E099 (11/05)

4. FEI Number 59-2920871	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent STINETT, ANNE G 1800 SECOND ST., STE 888 SARASOTA, FL 34236	
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7. Name and Address of New Registered Agent	
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$61.25 After January 1, 2007, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SINSENIO, CHRISTINE 6300 UNIVERSITY AVE SARASOTA, FL 34240 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Rebecca J. Proctor 1990 Main Street Suite 700 Sarasota FL 34236 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD SELLS, ALYSSA 1800 SECOND ST., STE 720 SARASOTA, FL 34236 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP Brenda Nelms 355 West Venice Av Venice FL 34285 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD STINNETT, ANNE 1800 2ND ST. #888 SARASOTA, FL 34236 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	900080693549 10/10/06--01068--012 **61.25 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MOYA, EVELYN L 5250 17TH ST, STE B SARASOTA, FL 34235 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Jennie Lascelle 845 Tropical Circle Sarasota FL 34236 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SCHMOYER, MARJORIE 1800 SECOND ST., STE 700 SARASOTA, FL 34236 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Stephanie Fackender 1900 Ringling Blvd Sarasota FL 34236 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MCCAY, TELESE 2055 WOOD ST, SUITE 120 SARASOTA, FL 34237 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Cindy Hill Ford 2055 Wood St Sarasota FL 34236 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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:	Rebecca J. Proctor, Pres	10/5/06	941-366-0115
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #