2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002075

FILED Jan 09, 2009 Secretary of State

Entity Name: SARASOTA FLORIDA ASSOCIATION FOR WOMEN LAWYERS, INC.

Current Principal Place of Business: New Principal Place of Business: 355 W VENICE AVE 1274 MANDALAY POINT VENICE, FL 34285 SARASOTA, FL 34242 **Current Mailing Address: New Mailing Address:** SARASOTA FAWL PO BOX 48344 SARASOTA, FL 34230 FEI Number: 59-2920871 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STINNETT, ANNE G 1801 FIELD RD SARASOTA, FL 34231 US 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete NELMS, BRENDA FAMIGLIO, JENNIE L Name: Name: 355 W VENICE AVE Address: 1247 MANDALAY POINT Address: City-St-Zip: VENICE, FL 34285 City-St-Zip: SARASOTA, FL 34242 Title: () Delete Title: (X) Change () Addition Name: LASCELLE, JENNIE Name: STEPHAN, MICHELE S Address: 1247 MANDALAY PTE RD Address: 2033 WOOD ST., STE 200 City-St-Zip: SARASOTA, FL 34242 City-St-Zip: SARASOTA, FL 34237 Title: () Delete Title: () Change () Addition STINNETT, ANNE G Name: Name: Address: 1801 FIELD RD Address: City-St-Zip: SARASOTA, FL 34231 City-St-Zip: Title: () Delete Title: () Change () Addition Name: FIELDS, PAMELA Name: 434 S WASHINGTON STE 120 Address: Address: City-St-Zip: SARASOTA, FL 34236 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANNE G. STINNETT TD 01/09/2009