

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000003425

1. Entity Name

THE ROTARY CLUB OF SARASOTA, A.M., INC.

FILED

Mar 07, 2002 8:00 am
Secretary of State

03-07-2002 90006 018 ****61.25

Principal Place of Business

Mailing Address

2790 MOSS OAK DR.
SARASOTA FL 34231
US

2790 MOSS OAK DR.
SARASOTA FL 34231
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

36-3980994

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GERACI, LARRY
4131 MARSEILLES AVE.
STE. 11
SARASOTA FL 34233

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☐ Delete
NAME GERACI, LARRY
STREET ADDRESS 4131 MARSEILLES AVE.
CITY-ST-ZIP SARASOTA FL 34233

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☐ Delete
NAME SMITH, ALAN L
STREET ADDRESS 385 NORTH POINT RD #502
CITY-ST-ZIP OSPREY FL 34229

TITLE VD - Vice President ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME SNYDER, DONALD H JR
STREET ADDRESS 5803 26TH STREET WEST
CITY-ST-ZIP BRADENTON FL 34207

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME MARKS, MATHEW J
STREET ADDRESS 4632 73RD ST E
CITY-ST-ZIP BRADENTON FL 34203

TITLE PD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Change ☒ Addition
NAME John Compton
STREET ADDRESS 4131 Marseilles Ave Ste 11
CITY-ST-ZIP Sarasota FL 34233

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/31/02

Date

941-364-7495

Daytime Phone #

CR2E037 (9/01)