

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 29, 2007 8:00 am**  
**Secretary of State**

03-29-2007 90015 047 \*\*\*\*61.25

<b>DOCUMENT # N94000005115</b>					
<b>1. Entity Name</b> THE C. G. JUNG SOCIETY OF SARASOTA, INC.					
<b>Principal Place of Business</b> 3652 ALLENWOOD STREET SARASOTA, FL 34232 US			<b>Mailing Address</b> P.O. BOX 50611 SARASOTA, FL 34232 US		
<b>2. Principal Place of Business - No P.O. Box #</b>  Suite, Apt. #, etc.		<b>3. Mailing Address</b>  Suite, Apt. #, etc.		03262007 Chg-NP CR2E037 (12/06)	
<b>City &amp; State</b>		<b>City &amp; State</b>		<b>4. FEI Number</b> 65-0480102	
<b>Zip</b>		<b>Country</b>		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  ERICKSON, JOY 3652 ALLENWOOD ST. SARASOTA, FL 34232			<b>7. Name and Address of New Registered Agent</b>  Name Street Address (P.O. Box Number is Not Acceptable) City		
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 _____ <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, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>			
<b>TITLE</b> PD <b>NAME</b> GURLEY, MARY <b>STREET ADDRESS</b> 318 BAYSHORE ROAD <b>CITY - ST - ZIP</b> NOKOMIS, FL 34275	<input checked="" type="checkbox"/> Delete				
<b>TITLE</b> SD <b>NAME</b> CONE, ELLEN <b>STREET ADDRESS</b> 4617 E ROBINHOOD TRAIL <b>CITY - ST - ZIP</b> SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete				
<b>TITLE</b> TD <b>NAME</b> GURLEY, LAWRENCE <b>STREET ADDRESS</b> 318 BAYSHORE ROAD <b>CITY - ST - ZIP</b> NOKOMIS, FL 34275	<input checked="" type="checkbox"/> Delete				
<b>TITLE</b> VPD <b>NAME</b> DOYLE, FRANCES F <b>STREET ADDRESS</b> 5132 MARSHFIELD LANE <b>CITY - ST - ZIP</b> SARASOTA, FL 34235	<input type="checkbox"/> Delete				
<b>TITLE</b> 2VPD <b>NAME</b> SHOCKET, BARBARA <b>STREET ADDRESS</b> 5142 COTE DU RHONE WAY <b>CITY - ST - ZIP</b> OSPNEY, FL 34229	<input type="checkbox"/> Delete				
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Delete				
<b>TITLE</b> SD <b>NAME</b> FOSS, SHIRLEY <b>STREET ADDRESS</b> 820 CEDARCREST CT <b>CITY - ST - ZIP</b> SARASOTA, FL 34232	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>TITLE</b> NAME <b>STREET ADDRESS</b> <b>CITY - ST - ZIP</b>	<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:** Gary J. Hartzler **GARY J. HARTZLER, TREASURER** **3/25/07 941-722-5347**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40044054

2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT ATTACHMENT

DOCUMENT # N94000005115

THE C. G. JUNG SOCIETY OF SARASOTA, INC.

FEI NUMBER: 65-0480102

OFFICERS AND DIRECTORS TO BE ADDED

- 7        D  
          MACKEY, EARL  
          427 PELICAN MOORINGS  
          VENICE, FL 34285
- 8        D  
          MARTIN, ALICE  
          8400 VAMO RD., #1165  
          SARASOTA, FL 34231
- 9        D  
          WELLS, COLLEEN  
          1750 BEN FRANKLIN DR., #4B  
          SARASOTA, FL 34236