

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # N94000005353

1. Entity Name  
SPORTS COMMITTEE OF SARASOTA, INC.



Principal Place of Business  
1834 MAIN ST  
SARASOTA, FL 34236

Mailing Address  
1834 MAIN ST  
SARASOTA, FL 34236



01132006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0572468

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**6. Name and Address of Current Registered Agent**

PADEREWSKI, ALEXANDER G  
1834 MAIN ST  
SARASOTA, FL 34236

**DO NOT WRITE  
IN THIS SPACE**

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

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE	TD
NAME	SHEA, NORMAN J III
STREET ADDRESS	800 S OSPREY AVE
CITY-ST-ZIP	SARASOTA, FL
TITLE	SD
NAME	LUCAS, TOM
STREET ADDRESS	2571 GREEN OAK CT
CITY-ST-ZIP	SARASOTA, FL
TITLE	D
NAME	DART, TOM
STREET ADDRESS	1549 RINGLING BLVD
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	D
NAME	HAY, JOHN
STREET ADDRESS	4028 OAKLEY GREEN
CITY-ST-ZIP	SARASOTA, FL 34235
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000399485  
02/01/06-80014-011 61.25

**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #