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Mar 10 1998 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N94000005723 (1)**

1. Corporation Name

**YOUNG MOTHER'S LEAGUE OF SARASOTA, INC.**

Principal Place of Business

Mailing Address

**7061 SOUTH TAMiami TR.**  
**# 111**  
**SARASOTA FL 34231**  
**US**

**7061 SOUTH TAMiami TR.**  
**# 111**  
**SARASOTA FL 34231**  
**US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

**11/17/1994**

4. FEI Number

**65-0461633**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☒ Yes ☐ No

10. Name and Address of New Registered Agent

**GARDI, DEBRA A**  
**7061 SOUTH TAMiami TR.**  
**SARASOTA FL 34231**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when relating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P D ☒ DELETE

NAME **MC CAMPBELL, KRISTA**  
 STREET ADDRESS **4712 SPRINGMEADOW LANE**  
 CITY - ST - ZIP **SARASOTA FL 34233**

TITLE VP D ☒ DELETE

NAME **REECE, ANN**  
 STREET ADDRESS **4717 LONGLAKE DRIVE**  
 CITY - ST - ZIP **SARASOTA FL 34233**

TITLE VP ☒ DELETE

NAME **WIEDMAN, RON**  
 STREET ADDRESS **6560 WATERFRONT CIRCLE**  
 CITY - ST - ZIP **SARASOTA FL 34238**

TITLE S ☒ DELETE

NAME **GALE, LAURA**  
 STREET ADDRESS **2403 ICECAPADE DRIVE**  
 CITY - ST - ZIP **SARASOTA FL 34240**

TITLE T D ☐ DELETE

NAME **GARDI, DEBRA A**  
 STREET ADDRESS **7061 SOUTH TAMiami TR.**  
 CITY - ST - ZIP **SARASOTA FL 34231**

TITLE ☐ DELETE

NAME  
 STREET ADDRESS  
 CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME **Brenda Frost**  
 1.3 STREET ADDRESS **2268 Hibiscus St**  
 1.4 CITY - ST - ZIP **Sarasota FL 34239**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME **Maggie Richardson**  
 2.3 STREET ADDRESS **2461 E. Scarlet Oak Ct**  
 2.4 CITY - ST - ZIP **Sarasota FL 34232**

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME **Laurie Patrusky**  
 3.3 STREET ADDRESS **4855 Sweetmeadow Cir**  
 3.4 CITY - ST - ZIP **Sarasota, FL 34238**

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME **Jane Hall**  
 4.3 STREET ADDRESS **4513 Windsor Ct**  
 4.4 CITY - ST - ZIP **Bradenton FL 34203**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY - ST - ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Debra A Gardi* Treas 3/3/98 941-925-2098

CR2E037 (10/97)