2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002565

Address:

City-St-Zip:

6918 JARVIS RD

SARASOTA, FL 34241

FILED Jan 11, 2009 Secretary of State

Entity Name: SARASOTA SAILOR SOCCER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 1000 S. SCHOOL AVE. SARASOTA, FL 34236 **Current Mailing Address: New Mailing Address:** 1000 S. SCHOOL AVE SARASOTA, FL 34236 FEI Number: 65-0776738 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: HAMMERSLEY, PHILIP N FAMIGLIO, GEORGE V 1819 MAIN ST SUITE 610 1634 MAIN ST SARASOTA, FL 34236 SARASOTA, FL 34236 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: GEORGE V, FAMIGLIO 01/11/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete WEBSTER, LORI A Name: Name: 4817 SHADY VIEW CT Address: Address: City-St-Zip: SARASOTA, FL 34232 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: CARDEN, DONNA Name: TUCK, LEE Address: 4940 HIDDEN OAKS LN Address: 1060 SEAGROVE LN City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34242 Title: (X) Delete Title: () Change () Addition MORRISEY, DALE L Name: Name: Address: 1350 S SHADE AVE Address: City-St-Zip: SARASOTA, FL 34239 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LEONARD, LESLIE Name:

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.

Address:

City-St-Zip:

SIGNATURE: LEE TUCK Τ 01/11/2009