
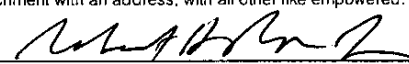


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2005 8:00 am
Secretary of State

02-01-2005 90037 040 ****61.25

DOCUMENT # N96000003877					
1. Entity Name THE GREATER SARASOTA SERTOMA FOUNDATION, INC.					
Principal Place of Business 330 S PINEAPPLE AVE STE 106 SARASOTA, FL 34236 US			Mailing Address 330 S PINEAPPLE AVE STE 106 SARASOTA, FL 34236 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
DARNELL, ROBERT W 2033 MAIN STREET SUITE 400 SARASOTA, FL 34237				Name	
				Street Address (P.O. Box Number is Not Acceptable) 1820 Ringling Boulevard	
				City	
				FL	Zip Code 34236
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) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DARNELL, ROBERT W			NAME	
STREET ADDRESS	2033 MAIN ST STE 400			STREET ADDRESS	1820 Ringling Boulevard
CITY-ST-ZIP	SARASOTA, FL 34237			CITY-ST-ZIP	Sarasota, FL 34236
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENNETT, MICHAEL S			NAME	
STREET ADDRESS	7304 BROUGHTON ST			STREET ADDRESS	7011 15th Street E.
CITY-ST-ZIP	SARASOTA, FL 34236			CITY-ST-ZIP	Sarasota, FL 34243
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WESSEL, THOMAS J			NAME	
STREET ADDRESS	2455 WEBBER ST			STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 34232			CITY-ST-ZIP	
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FAUST, MARTIN			NAME	Steve Grantham
STREET ADDRESS	1225 2ND ST			STREET ADDRESS	5330 Siesta Cove Drive
CITY-ST-ZIP	SARASOTA, FL 34239			CITY-ST-ZIP	Sarasota, FL 34242
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PIPER, ROBERT H JR			NAME	
STREET ADDRESS	330 S PINEAPPLE AVE SUITE 102			STREET ADDRESS	
CITY-ST-ZIP	SARASOTA, FL 34236			CITY-ST-ZIP	
TITLE	D	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CURTIN, JAMES M			NAME	
STREET ADDRESS	2119 LYCHEE LANE			STREET ADDRESS	
CITY-ST-ZIP	NOKOMIS, FL 34275			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: 				1/26/05	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<small>Date</small>	
				<small>Daytime Phone #</small>	