2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Jan 18, 2007 08:00 AM Secretary of State

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1. Entity Name

THE GREATER SARASOTA SERTOMA FOUNDATION,



Principal Place of Business

Mailing Address

330 S PINEAPPLE AVE

330 S PINEAPPLE AVE

STE 106 STE 106 SARASOTA, FL 34236 US

SARASOTA, FL 34236



01042007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 65-0687492

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DARNELL, ROBERT W 1820 RINGLING BOULEVARD SARASOTA, FL 34236

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	named entity submits this statement for the ptions of registered agent.	surpose of changing its registe	ered office or i	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept						
SIGNATURE.											
	Signature, typed or printed name of registered agent and title	applicable (NOTE Registe	red Agent signatur	e required when reinstating)	DATE						
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees							
10.	OFFICERS AND DIREC	TORS									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DARNELL, ROBERT W 1820 RINGLING BOULEVARD SARASOTA, FL 34236				U00000591258 01/19/07-80015-012 61.25						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENNETT, MICHAEL S 7011 15TH STREET EAST SARASOTA, FL 34243										
IITLE NAME STREET ADDRESS CITY-ST-ZIP	D WESSEL, THOMAS J 2455 WEBBER ST SARASOTA, FL 34232			DO NOT WRITE							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRANTHAM, STEVE 5330 SIESTA COVE DRIVE SARASOTA, FL 34242			IN	THIS SPACE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIPER, ROBERT H JR 330 S PINEAPPLE AVE SUITE 102 SARASOTA, FL 34236										
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CURTIN, JAMES M 2119 LYCHEE LANE NOKOMIS EL 34275										

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.