2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001152

FILED Feb 02, 2005 Secretary of State

Entity Name: SARASOTA SAILOR CIRCUS FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2075 BAHIA VISTA STREET SARASOTA, FL 34239 **Current Mailing Address: New Mailing Address:** 2075 BAHIA VISTA STREET SARASOTA, FL 34239 FEI Number: 65-0810109 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MUNCY, KEITH 2075 BAHIA VISTA STREET SARASOTA, FL 34239 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete SCHWANTZ, ANNE SCHWANTZ, ANNE Name: Name: 4141 TEE ROAD Address: 4141 TEE ROAD Address: City-St-Zip: SARASOTA, FL 34235 City-St-Zip: SARASOTA, FL 34235 Title: (X) Delete Title: () Change () Addition RAMSEY, JERRY Name: Name: Address: 4760 COUNTRY MEADOWS BLVD Address: City-St-Zip: SARASOTA, FL 34239 City-St-Zip: Title: () Delete Title: (X) Change () Addition WEST, SUE Name: SWIFT, JON Name: 5823 WHISTLEWOOD CIRCLE Address: Address: 2221 8TH ST City-St-Zip: SARASOTA, FL 34237 SARASOTA, FL 34232 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: CAMPBELL, PATTY Name: JACKSON, PATRICIA 1937 N ALLENDALE Address: Address: 4311 4TH AVE NE SARASOTA, FL 34234 City-St-Zip: City-St-Zip: BRADENTON, FL 34208 Title: (X) Delete Title: () Change () Addition DUFF, MIKE Name: Name: 2285 NOVUS STREET Address: Address: City-St-Zip: SARASOTA, FL 34237 City-St-Zip: Title: () Delete Title: () Change () Addition REHMEYER, RICHARD Name: Name: Address: 1880 ARLINGTON ST Address: SARASOTA, FL 34236 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: KEITH MUNCY D 02/02/2005