

DOCUMENT # N97000006652

1. Entity Name

SARASOTA COMMUNITY BLOOD BANK FOUNDATION, INC.

Principal Place of Business

Mailing Address

1760 MOUND STREET
SARASOTA FL 34236

1760 MOUND STREET
SARASOTA FL 34236-7761

2. Principal Place of Business

85 Cocoanut Avenue

3. Mailing Address

85 Cocoanut Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sarasota, FL

City & State

Sarasota, FL

4. FEI Number

65-0823005

Applied For

Not Applicable

Zip

34236

Country

Sarasota

Zip

34236

Country

Sarasota

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRENCH, TED
1750 RINGLING BLVD
SARASOTA FL 34236

Name

Michele B. Grimes, Esquire

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

200 S. Orange Avenue

City

Sarasota

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.

SIGNATURE

Michele B. Grimes

Registered Agent

4-20-2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME DESJARLAIS, MARY LYNN
STREET ADDRESS 8075 BENAVA RD S
CITY-ST-ZIP SARASOTA FL 34238 ☐ Delete

TITLE DV
NAME Desjarlais, Mary Lynn
STREET ADDRESS 8075 Beneva Road S.
CITY-ST-ZIP Sarasota, FL 34238 ☒ Change ☐ Addition

TITLE DS
NAME MARSHALL, JANE
STREET ADDRESS 1760 MOUND ST
CITY-ST-ZIP SARASOTA FL 34236 ☐ Delete

TITLE DT
NAME Buck, Jim
STREET ADDRESS 5207 Hidden Harbor Rd.
CITY-ST-ZIP Sarasota, FL 34242 ☐ Change ☒ Addition

TITLE D
NAME TOALE, JAMES
STREET ADDRESS 22 S TUTTLE AVE, SUITE 3
CITY-ST-ZIP SARASOTA FL 34237 ☐ Delete

TITLE DP
NAME Toale, James
STREET ADDRESS 22 S. Tuttle Ave., Suite 3
CITY-ST-ZIP Sarasota, FL 34237 ☒ Change ☐ Addition

TITLE DP
NAME KRUMHOLZ, RICHARD
STREET ADDRESS 105 N WARBLER LANE
CITY-ST-ZIP SARASOTA FL 34236 ☒ Delete

TITLE D
NAME Knowles, Charles
STREET ADDRESS 85 Cocoanut Ave.
CITY-ST-ZIP Sarasota, FL 34236 ☐ Change ☒ Addition

TITLE DT
NAME HERRON, WILLIAM D
STREET ADDRESS 5590 BEE RIDGE RD., STE. 5
CITY-ST-ZIP SARASOTA FL 34233 ☒ Delete

TITLE D
NAME Rehmyer, Richard
STREET ADDRESS 85 Cocoanut Ave.
CITY-ST-ZIP Sarasota, FL 34236 ☐ Change ☒ Addition

TITLE D
NAME Stafford, Ed
STREET ADDRESS 85 Cocoanut Ave.
CITY-ST-ZIP Sarasota, FL 34236 ☐ Delete

TITLE D
NAME Wise, Margaret
STREET ADDRESS 85 Cocoanut Ave.
CITY-ST-ZIP Sarasota, FL 34236 ☐ Change ☒ Addition

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:

Ed Stafford
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90109 043 ****70.00



DO NOT WRITE IN THIS SPACE

CR20037 (1/99)

4-13-00