

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000007163

FILED
Jan 27, 2010
Secretary of State

Entity Name: MANASOTA DIETETIC ASSOCIATION INCORPORATED

Current Principal Place of Business:

508 BAYVIEW PARKWAY
NOKOMIS, FL 34275

New Principal Place of Business:

Current Mailing Address:

508 BAYVIEW PARKWAY
NOKOMIS, FL 34275

New Mailing Address:

FEI Number: 65-1006115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAPELL, CHRISTINE A
1982 CAPITAL CIRCLE NE
STE C
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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:

Title: P
Name: YATES, DEBORAH
Address: 5037 82ND WAY EAST
City-St-Zip: SARASOTA, FL 34243

Title: VP
Name: WEBER, PAULETTE
Address: 7500 40TH AVENUE WEST #204
City-St-Zip: BRADENTON, FL 34209

Title: S
Name: WILLIAMS, CORISTA
Address: 8330 LAKEWOOD RANCH BLVD
City-St-Zip: LAKEWOOD RANCH, FL 34202

Title: WEB
Name: DONAVAN, HANNAH
Address: 5212 WILLOW LINKS
City-St-Zip: SARASOTA, FL 34235

Title: T
Name: DUMAS, KARLA P
Address: 508 BAYVIEW PARKWAY
City-St-Zip: NOKOMIS, FL 34275

Title: SD
Name: LONDON, BONNI
Address: 4740 CENTERFRONTE BLVD
City-St-Zip: SARASOTA, FL 34233

I hereby 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 all other like empowered.

SIGNATURE: KARLA PIGNOTTI DUMAS

T

01/27/2010

Electronic Signature of Signing Officer or Director

Date