

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003155

FILED
Apr 21, 2008
Secretary of State

Entity Name: SARASOTA COURT WATCH, INC.

Current Principal Place of Business:

710 N. OSPREY AVE.
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

617 GILLESPIE AVENUE
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 65-1132659

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLAND, LINDA E
617 GILLESPIE AVENUE
SARASOTA, FL 34236 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: PD () Delete
Name: HOLLAND, LINDA E
Address: 617 GILLESPIE AVENUE
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: MCINTOSH, JIM
Address: P.O.BOX 1456
City-St-Zip: SARASOTA, FL 34230

Title: D () Delete
Name: GELINAS, MARIA
Address: 1325 COCOANUT AVE.
City-St-Zip: SARASOTA, FL 34236

Title: VD () Delete
Name: DUNCAN, STAN
Address: 710 N. OSPREY AVE.
City-St-Zip: SARASOTA, FL 34236

Title: TD () Delete
Name: ROE, ERIC A
Address: 32117 MIARCACHEE ROAD
City-St-Zip: MYAKKA CITY, FL 34251

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LINDA E. HOLLAND

PD

04/21/2008

Electronic Signature of Signing Officer or Director

Date