

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002099

FILED
Apr 09, 2007
Secretary of State

Entity Name: SENIORNET SARASOTA LEARNING CENTER, INC.

Current Principal Place of Business:

RIVER CLUB SOUTH
7633 PINE VALLEY ST.
BRADENTON, FL 34202

New Principal Place of Business:

Current Mailing Address:

RIVER CLUB SOUTH
7633 PINE VALLEY ST.
BRADENTON, FL 34202

New Mailing Address:

FEI Number: 65-0909886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVIN, MYRON J
RIVER CLUB SOUTH
7633 PINE VALLEY ST.
BRADENTON, FL 34202 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: D () Delete
Name: STREETMAN, NANCY
Address: 4346 BRYANTE POND LN
City-St-Zip: SARASOTA, FL 34237

Title: D () Delete
Name: BOARDMAN, JOHN
Address: 9589 FOREST HILLS CIRCLE
City-St-Zip: SARASOTA, FL 34238

Title: SD () Delete
Name: STEARNS, BOB
Address: 4458 ATWOOD CIRCLE
City-St-Zip: SARASOTA, FL 34233

Title: PD () Delete
Name: LEVIN, MYRON J
Address: 7633 PINE VALLEY STREET
City-St-Zip: BRADENTON, FL 34202

Title: VPD () Delete
Name: FLOERSHEIMER, JOE
Address: 5814 FAIRWOODS CIRCLE
City-St-Zip: SARASOTA, FL 34243

Title: TD () Delete
Name: GLUNK, CHARLES W
Address: 4905 MARSHFIELD RD
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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 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: MYRON J. LEVIN

PD

04/09/2007

Electronic Signature of Signing Officer or Director

Date