

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2006 8:00 am
Secretary of State

02-16-2006 90039 007 ****61.25

DOCUMENT # N99000005810

1. Entity Name

M.E.D.A. OF SARASOTA, INC.



Principal Place of Business

1001 N WASHINGTON BLVD
102
SARASOTA FL 34236

Mailing Address

1001 N WASHINGTON BLVD
102
SARASOTA FL 34236

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0982443

Applied For

Not Applicable

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

MILLER, MARC A
1001 N WASHINGTON BLVD
102
SARASOTA FL 34236

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME BEACHEY, VERDA
STREET ADDRESS 4929 OLD CREEK DR
CITY-ST-ZIP SARASOTA FL 34233

TITLE DD ☒ Delete
NAME COMES, TED
STREET ADDRESS 27101 STATE RD 70 E
CITY-ST-ZIP MYAKKA CITY FL 34251

TITLE D ☒ Delete
NAME WEAVER, ROBERT
STREET ADDRESS 3910 ETON PLACE
CITY-ST-ZIP SARASOTA FL 34242-1

TITLE D ☒ Delete
NAME SCHLABUCH, MARLA
STREET ADDRESS 7901 CAMPBELL ROAD
CITY-ST-ZIP SARASOTA FL 34240

TITLE D ☐ Delete
NAME MILLER, MARC
STREET ADDRESS 1001 N WASHINGTON BLVD
CITY-ST-ZIP SARASOTA FL 34236

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME ~~Phil Yoder~~ President
STREET ADDRESS Phil Yoder
1323 S. Euclid Ave
CITY-ST-ZIP Sarasota FL 34239

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Phil Yoder

2/2/06

941-951-7579