

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000075302

FILED  
Apr 23, 2009  
Secretary of State

**Entity Name:** THE ORIGINAL GILLESPIE PARK NEIGHBORHOOD ASSOCIATION, EST. 1983, INC.

**Current Principal Place of Business:**

1666 5TH ST  
SARASOTA, FL 34236

**New Principal Place of Business:**

1653 5TH STREET  
SARASOTA, FL 34236

**Current Mailing Address:**

1666 5TH ST  
SARASOTA, FL 34236

**New Mailing Address:**

P. O. BOX 727  
SARASOTA, FL 34230

**FEI Number:** 37-1471899

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BARRON, JOHN  
1666 5TH ST  
SARASOTA, FL 34236 US

**Name and Address of New Registered Agent:**

SHANLEY, KATHY  
1653 5TH ST  
SARASOTA, FL 34236 US

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: KATHY SHANLEY

04/23/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BARRON, JOHN  
Address: 1666 5TH ST  
City-St-Zip: SARASOTA, FL 34236

Title: VP ( ) Delete  
Name: COBIAN, DANIELLE  
Address: 5301 ANGELES AVENUE  
City-St-Zip: SARASOTA, FL 34235

Title: T ( ) Delete  
Name: SHANLEY, KATHY  
Address: P.O. BOX 727  
City-St-Zip: SARASOTA, FL 34260

Title: S (X) Delete  
Name: MCKENZIE, ROSA  
Address: 2121 26TH AVENUE, EAST  
City-St-Zip: BRADENTON, FL 34208

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: WADSWORTH, VALARIE  
Address: 1606 7TH STREET  
City-St-Zip: SARASOTA, FL 34236

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHY SHANLEY

T

04/23/2009

Electronic Signature of Signing Officer or Director

Date