

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000160030

Entity Name: RED LEAF OF SARASOTA, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

2967 DICK WILSON DR
SARASOTA, FL 34240

New Principal Place of Business:

7536 WEEPING WILLOW DR
SARASOTA, FL 34241

Current Mailing Address:

2967 DICK WILSON DR
SARASOTA, FL 34240

New Mailing Address:

7536 WEEPING WILLOW DR
SARASOTA, FL 34241

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLYNN, TAMARA M
2967 DICK WILSON DR
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

FLYNN, TAMARA M
7536 WEEPING WILLOW DR
SARASOTA, FL 34241 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: TAMARA FLYNN

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BONN, JAMES R
Address: 2967 DICK WILSON DR
City-St-Zip: SARASOTA, FL 34240

Title: ST () Delete
Name: FLYNN, TAMARA M
Address: 2967 DICK WILSON DR
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BONN, JAMES R
Address: 7536 WEEPING WILLOW DR
City-St-Zip: SARASOTA, FL 34241

Title: ST (X) Change () Addition
Name: FLYNN, TAMARA M
Address: 7536 WEEPING WILLOW DR
City-St-Zip: SARASOTA, FL 34241

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TAMARA FLYNN

ST

04/29/2005

Electronic Signature of Signing Officer or Director

Date