

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V64982

FILED
Jan 29, 2008
Secretary of State

Entity Name: S&D ENTERPRISES OF SARASOTA, INC.

Current Principal Place of Business:

21 FILLMORE DR.
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

21 FILLMORE DR.
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 65-0356536

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN WINKLE, MARY E.
3844 BEE RIDGE RD.
SUITE 202
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

VAN WINKLE, MARY E.
2815 PROCTOR ROAD
SARASOTA, FL 34231 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:

01/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SMITH, SUZANNE
Address: 21 FILLMORE DR.
City-St-Zip: SARASOTA, FL

Title: VP () Delete
Name: HATCH SHAYMAN, LARA
Address: 21 FILLMORE DR.
City-St-Zip: SARASOTA, FL

Title: SEC () Delete
Name: CHATTERTO, DOROTHY
Address: 21 FILLMORE DRIVE
City-St-Zip: SARASOTA, FL

Title: T () Delete
Name: SMITH, ROBERT H
Address: 21 FILLMORE DRIVE
City-St-Zip: SARASOTA, FL

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:

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: LARA HATCH SHAYMAN

VP

01/29/2008

Electronic Signature of Signing Officer or Director

Date