2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Apr 16, 2019
Secretary of State
4006865961CC

DOCUMENT# N34481

Entity Name: THE FAMILY NETWORK ON DISABILITIES OF MANATEE/SARASOTA, INC.

Current Principal Place of Business:

1750 17TH STREET
BUILDING D
SARASOTA, FL 34234

Current Mailing Address:

P.O. BOX 110025
BRADENTON, FL 34211

FEI Number: 65-0156905

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, MARY JED
6562 BLUE GROSBEAK CIRCLE
LAKEWOOD RANCH, FL 34202 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	SECRETARY, DIRECTOR
Name	PADGETT, FRAN
Address	507 54TH STREET N W
City-State-Zip:	BRADENTON FL 34209

Title	PRESIDENT, DIRECTOR
Name	HOBSON, DEBORAH
Address	1652 SUMMER BREEZE WAY
City-State-Zip:	SARASOTA FL 34232

Title	TREASURER, DIRECTOR
Name	BAYER, KRISTOPHER
Address	7825 SENRAB DRIVE
City-State-Zip:	BRADENTON FL 34209

Title	DIRECTOR
Name	ECKERT, JEFF ESQ.
Address	5521 ROLLINGWOOD DRIVE SARASOTA
City-State-Zip:	FL FL 34232

Title	VP, DIRECTOR
Name	ZINK, HEATHER
Address	4118 ROCKY FORK TERRACE
City-State-Zip:	ELLENTON FL 34222

Title	DIRECTOR
Name	ALBRIGHT, CHERYL
Address	4734 SABAL KEY DRIVE
City-State-Zip:	BRADENTON FL 34203

Title	DIRECTOR
Name	BAYER, JUDY
Address	7825 SENRAB DRIVE
City-State-Zip:	BRADENTON FL 34209

Title	DIRECTOR
Name	HERRERA, STACIE DR.
Address	217 COHOSH ROAD
City-State-Zip:	NOKOMIS FL 34275

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: MARY J SMITH — EXECUTIVE DIRECTOR — 04/16/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	WILLIAMS, KIM
Address	2120 E VINA DEL MAR BLVD.
City-State-Zip:	ST PETE BEACH FL 33706

Title	DIRECTOR
Name	ZIMMERMANN, CHRISTY
Address	4219 32ND LANE E
City-State-Zip:	BRADENTON FL 34208