

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36986

Entity Name: SISTER CITIES ASSOCIATION OF SARASOTA, INC**Current Principal Place of Business:**1565 FIRST ST.
SARASOTA, FL 34236**Current Mailing Address:**1565 FIRST ST.
SARASOTA, FL 34236**FEI Number:** 65-0178684**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WERNER, KNOOP T
1565 FIRST 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:** WERNER KNOOP

01/16/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P, PRESIDENT
Name RUYLE-HULLINGER, BETH
Address 5057 CREEKSIDE TRAIL
City-State-Zip: SARASOT FL 34243

Title S
Name STEPHENS, VIRGINIA
Address 6467 CARRINGTON CIRCLE
City-State-Zip: SARASOTA FL 34238

Title T
Name KNOOP, WERNER
Address 7115 KENSINGTON COURT
City-State-Zip: UNIVERSITY PARK FL 34201

Title V
Name HULLINGER, CRAIG
Address 5057 CREEKSIDE TRAIL
City-State-Zip: SARASOTA FL 34243

Title V
Name STEILIN, CHARLES
Address 590 GOLDEN POND PLACE #4
City-State-Zip: SARASOTA FL 34235

Title V
Name WALLACE, WILLIAM
Address 4683 WILLOW WOOD COURT
City-State-Zip: SARASOTA FL 34231

Title OFFICER
Name DUNN, HARRY
Address 3624 PIN OAK ST
City-State-Zip: SARASOTA FL 34235

Title OFFICER
Name YOUNG, RAY DR.
Address 1684 SPRING CREEK DR
City-State-Zip: SARASOTA FL 34239

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: WERNER KNOOP**TREASURER**

01/16/2014

Electronic Signature of Signing Officer/Director Detail

Date