

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 20, 2001 8:00 am**  
**Secretary of State**

03-20-2001 90018 043 \*\*\*\*70.00

0076639

**DOCUMENT # 742349**

1. Entity Name

**THE JOHN AND MABLE RINGLING MUSEUM OF ART FOUNDA**

Principal Place of Business

5401 BAYSHORE ROAD  
 SARASOTA FL 34243  
 US

Mailing Address

5401 BAY SHORE ROAD  
 SARASOTA FL 34243  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-6214423

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEBB, IV, RICHARD S ESQ.  
 C/O LUTZ, WEBB & BOBO, P.A.  
 2 NORTH TAMiami TRAIL, SUITE 500  
 SARASOTA FL 34236

Name *Debi F. Schalch*

Street Address (P.O. Box Number is Not Acceptable)

*c/o Ringling Museum*

*5401 Bay Shore Road*

City *Sarasota*

FL

Zip Code *34243*

8. 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

*Debi F. Schalch*

*Debi F. Schalch*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete  
 NAME **AUSTIN-SMITH, SHEILA**  
 STREET ADDRESS **111 NW 1ST ST STE 625**  
 CITY-ST-ZIP **MIAMI FL 33128**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **DT** ☐ Delete  
 NAME **BARNETT, JAMES S**  
 STREET ADDRESS **7416 20TH AVE NW**  
 CITY-ST-ZIP **BRADENTON FL**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **D** ☐ Delete  
 NAME **JENNINGS, CHRISTINE**  
 STREET ADDRESS **2 N TAMiami TRAIL, SUITE 100**  
 CITY-ST-ZIP **SARASOTA FL**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE **DCP** ☐ Delete  
 NAME **COOK, MARLOW W**  
 STREET ADDRESS **444 N WASHINGTON DR**  
 CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **D** ☒ Change ☐ Addition  
 NAME **Cook, Marlow W.**  
 STREET ADDRESS **444 N. Washington Dr.**  
 CITY-ST-ZIP **Sarasota, FL 34236**

TITLE **DC** ☐ Delete  
 NAME **JOHNSON, CAROLYN G**  
 STREET ADDRESS **3348 OLD OAK DRIVE**  
 CITY-ST-ZIP **SARASOTA FL 34239**

TITLE **DCP** ☒ Change ☐ Addition  
 NAME **Johnson, Carolyn G.**  
 STREET ADDRESS **3348 Old Oak Drive**  
 CITY-ST-ZIP **Sarasota, FL 34239**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ☒

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*March 15, 2001 941-366-4220*

CR2E037 (10/00)

The John & Mable Ringling Museum of Art Foundation, Inc.  
5401 Bay Shore Road  
Sarasota, FL 34243

9349074  
# 742349

11.	Additions/Changes to Officers and Directors in 10.	
Title Name Street Address City-ST-Zip	DS Jenkins, Dorothy C. 456 Lone Palm Drive Lakeland, FL 33815	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Andrews, Rhea 5265 Gulf of Mexico Drive #310 Longboat Key, FL 34228	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Band, David S. 240 Pineapple Avenue Sarasota, FL 34236	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Blalock, Robert G. 802 11 <sup>th</sup> Street W. Bradenton, FL 34206	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Bott, Alice W. 6269 Midnight Pass Road Sarasota, FL 34243	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Buchanan, Vernon G. 707 S. Washington Blvd. Sarasota, FL 34236	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Merritt-Darlington, Eleanor 3692 Walden Pond Drive Sarasota, FL 34240	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Doss, Betty 11 Tidy Island Bradenton, FL 34210	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Gallup, Allyn 1284 N. Palm Avenue Sarasota, FL 34236	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Heller, Kay Culbreath 5505 Gulf of Mexico Drive #222 Longboat Key, FL 37228	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Johnson, Robert M. 27 S. Orange Avenue Sarasota, FL 344236	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Portnoy, Simon 1520 Ringling Blvd. Sarasota, FL 34236	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Roskamp, Robert G. 783 S. Orange Avenue, Suite 210 Sarasota, FL 34236	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Title Name Street Address City-ST-Zip	D Straz, David A. 4401 W. Kennedy Blvd, Suite 150 Tampa, FL 33609	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition