Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 739926 Entity Name: THE IVY LEAGUE CLUB, INCORPORATED

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

1800 SECOND STREET SUITE 818 SARASOTA, FL 34236

### **Current Mailing Address:**

P O BOX 2845 SARASOTA, FL 34230 US

# FEI Number: 59-1825920

#### Name and Address of Current Registered Agent:

SCOTT, NEIL W 1800 SECOND STREET SUITE 818 SARASOTA, FL 34236 US Certificate of Status Desired: No

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	: NEIL W. SCOTT		02/22/2020	
	Electronic Signature of Registered Agent		Date	
Officer/Dire	ctor Detail :			
Title	ASSISTANT TREASURER & DIRECTOR	Title	PRESIDENT	
Name	JANNEY, OLIVER J	Name	DOWNER, DAVID	
Address	8555 WOODBRIAR DR	Address	2288 PINE VIEW CIRCLE	
City-State-Zip:	SARASOTA FL 34238	City-State-Zip:	SARASOTA FL 34231	
<b>T</b> :0 -		Title	DIRECTOR	
Title		Name	KRUK, MILTON	
Name	BULLOCK, JOHN	Address	1281 GULF OF MEXICO DRIVE, #506	
Address	565 SANCTUARY DRIVE, #B506	City-State-Zip:	LONGBOAT KEY FL 34228	
City-State-Zip:	LONGBOAT KEY FL 34228			
Title	DIRECTOR	Title	TREASURER & DIRECTOR	
Name	DAILEY, LOUISE S	Name	SCOTT, NEIL W	
Address	497 YACHT HARBOR DRIVE	Address	1800 SECOND STREET SUITE 818	
City-State-Zip:	OSPREY FL 34229	City-State-Zip:		
ītle	DIRECTOR	Title	DIRECTOR	
Name	BENNETT, JAMES	Name	JORDAN, MANDA	
Address	562 MARSH CREEK ROAD	Address	P.O. BOX 287	
City-State-Zip:	VENICE FL 34292	City-State-Zip:	TERRA CEIA FL 34250	

# 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: NEIL W. SCOTT

TREASURER

02/22/2020

Date

## **Officer/Director Detail Continued :**

400 GOLDEN GATE POINT, #33

City-State-Zip: SARASOTA FL 34236

Address

Title	SECRETARY & DIRECTOR	Title	DIRECTOR
Name	OFFRINGA, PETER	Name	ALBERS, CHARLES
Address	15016 BOWFIN TERRACE	Address	340 S. PALM AVE., UNIT 512
City-State-Zip:	LAKEWOOD RANCH FL 34202	City-State-Zip:	SARASOTA FL 34236
Title	DIRECTOR	Title	DIRECTOR
Name	RAUCH, MARTIN	Name	WATKINS, DEBORAH
Address	8742 MISTY CREEK DRIVE	Address	1410 QUAIL DRIVE
City-State-Zip:	SARASOTA FL 34241	City-State-Zip:	SARASOTA FL 34231
Title	DIRECTOR	Title	DIRECTOR
Name	STEFENHAGEN, STEVEN	Name	WRIGHT, JACK
Address	615 EAGLE WATCH LANE	Address	8560 HERON LAGOON CIRCLE
City-State-Zip:	OSPREY FL 34229-9378	City-State-Zip:	SARASOTA FL 34242
Title	DIRECTOR	Title	VICE PRESIDENT & DIRECTOR
Name	AVISON, SHARON	Name	BASH, JOHN
Address	7131 BOCA GROVE PLACE, UNIT 102	Address	7506 BOTANICA PARKWAY
City-State-Zip:	LAKEWOOD RANCH FL 34202	City-State-Zip:	SARASOTA FL 34238
Title	DIRECTOR		
Name	GUSTAFSON, ELAINE		