

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003921

Entity Name: SARASOTA COUNTY VETERANS COMMISSION INC.**Current Principal Place of Business:**4306 REFLECTIONS PARKWAY
SARASOTA, FL 34233**Current Mailing Address:**P O BOX 2055
SARASOTA, FL 34230 US**FEI Number: 80-0853008****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**DONNER, MARTIN
4306 REFLECTIONS PARKWAY
SARASOTA, FL 34233 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:** MARTIN DONNER

01/24/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MORIERA, CARLOS
Address P O BOX 2055
City-State-Zip: SARASOTA FL 34230

Title TREASURER
Name DONNER, MARTY
Address P O BOX 2055
City-State-Zip: SARASOTA FL 34230

Title VP
Name KIELTY, CHRIS
Address P O BOX 2055
City-State-Zip: SARASOTA FL 34230

Title BOARD OF DIRECTORS
Name CONNELLY, KEVIN
Address P O BOX 2055
City-State-Zip: SARASOTA FL 34230

Title BOARD OF DIRECTORS
Name PLEWS, DENNIS
Address P O BOX 2055
City-State-Zip: SARASOTA FL 34230

Title MR
Name SMITH, TED
Address P O BOX 2055
City-State-Zip: SARASOTA FL 34230

Title BOARD OF DIRECTORS
Name VAUGHN, BARBARA
Address PO BOX 2055
City-State-Zip: SARASOTA FL 34240

Title BOARD OF DIRECTORS
Name GOLEMBESKI, JOE
Address PO BOX 2055
City-State-Zip: SARASOTA FL 34230

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: CARLOS MORIERA

PRESIDENT

01/24/2022

Electronic Signature of Signing Officer/Director Detail

Date