

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09330

**Entity Name:** INDIAN BEACH-SAPPHIRE SHORES NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**3008 BAY SHORE ROAD  
SARASOTA, FL 34234**Current Mailing Address:**P.O. BOX 49673  
SARASOTA, FL 34230 US**FEI Number: 83-1609882****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BLOOM, JUSTIN  
3008 BAY SHORE ROAD  
SARASOTA, FL 34234 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: JUSTIN BLOOM****01/08/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :****Title** DIRECTOR  
**Name** MORRISS, DAVID  
**Address** 4900 BRYWILL CIRCLE  
**City-State-Zip:** SARASOTA FL 34234**Title** DIRECTOR  
**Name** FARR, DON  
**Address** 3301 BAY SHORE RD.  
**City-State-Zip:** SARASOTA FL 34234**Title** RECORDER  
**Name** BARYLSKI, ROBERT  
**Address** 4919 BAY SHORE ROAD  
**City-State-Zip:** SARASOTA FL 34234**Title** DIRECTOR  
**Name** LUMPKIN, KELVIN  
**Address** 2400 IXORA AVENUE  
**City-State-Zip:** SARASOTA FL 34234**Title** TREASURER  
**Name** CANNON, KITTY  
**Address** 2920 BAY SHORE CIRCLE  
**City-State-Zip:** SARASOTA FL 34234**Title** PRESIDENT  
**Name** GONET, JOANNE  
**Address** 3617 IROQUOIS AVENUE  
**City-State-Zip:** SARASOTA FL 34234**Title** VICE PRESIDENT  
**Name** COLLIN, ERIC  
**Address** 3814 IROQUOIS AVENUE  
**City-State-Zip:** SARASOTA FL 34234**Title** DIRECTOR  
**Name** BAUSBACK, HENRY  
**Address** 2827 BON AIR AVENUE  
**City-State-Zip:** SARASOTA FL 34234**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: KITTY CANNON****TREASURER****01/08/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name LUSTIG, HERB  
Address 2445 ALAMEDA AVENUE  
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR  
Name WOOSTER, CECI  
Address 652 MECCA DRIVE  
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR  
Name JACOBSON, JESSICA  
Address 3515 CHAPEL DRIVE  
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR  
Name SLACKMAN, BOB  
Address 969 ALAMEDA LANE  
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR  
Name STEWART, JOHN  
Address 981 INDIAN BEACH DRIVE  
City-State-Zip: SARASOTA FL 34234