2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: SARASOTA CONCERT ASSOCIATION, INC.

Current Principal Place of Business:

700 JOHN RINGLING BOULEVARD SARASOTA, FL 34236

Current Mailing Address:

P. O. BOX 211 SARASOTA, FL 34230 US

FEI Number: 59-2850861

Name and Address of Current Registered Agent:

REIBMAN, RICHARD E 519 BLUE JAY PLACE 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	E: RICHARD E. REIBMAN		01/09/2017	
	Electronic Signature of Registered Agent		Date	
Officer/Dire	ctor Detail :			
Title	DIRECTOR	Title	ASST. TREASURER	
Name	LIGHT, CHRISTOPHER U	Name	MARKHAM, JOHN	
Address	1135 GULF OF MEXICO DR, APT 405	Address	700 JOHN RINGLING BLVD, APT W-	
City-State-Zip:	LONGBOAT KEY FL 34228	City-State-Zip:	215 SARASOTA FL 34236	
Title	SECRETARY	Title	PRESIDENT	
Name	GOODMAN, JOHN I	Name	MCINTYRE, JOY	
Address	700 JOHN RINGLING BLVD, APT T-508	Address	5137 CANTABRIA CREST	
City-State-Zip:	SARASOTA FL 34236	City-State-Zip:	SARASOTA FL 34238	
Title	DIRECTOR	Title	VP	
Name	LOWITT, PHYLLIS	Name	SICILIANO, ARTHUR	
Address	4390 LONGCHAMPS DRIVE	Address	1010 GULF WINDS WAY	
City-State-Zip:	SARASOTA FL 34235	City-State-Zip:	NOKOMIS FL 34275	
Title	DIRECTOR	Title	TREASURER	
Name	CERONE, DAVID	Name	REIBMAN, RICHARD E	
Address	1660 SUMMERHOUSE LANE	Address	519 BLUE JAY PLACE	
City-State-Zip:	APT 304 SARASOTA FL 34242	City-State-Zip:	SARASOTA FL 34236	
		Continues of	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: RICHARD E. REIBMAN

DIRECTOR

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	VP	Title	DIRECTOR
Name	OARR, KATHERINE	Name	CROSBY, CAROLE
Address	7561 FAIRLINKS CT	Address	928 INDIAN BEACH DRIVE
City-State-Zip:	SARASOTA FL 34243	City-State-Zip:	SARASOTA FL 34234
Title	DIRECTOR	Title	DIRECTOR
Name	HAMAD, RENEE	Name	MCCLOUD , GANT
Address	1814 ROLAND STREET	Address	7575 ALISTER MACKENZIE DRIVE
City-State-Zip:	SARASOTA FL 34231	City-State-Zip:	SARASOTA FL 34240
Title	DIRECTOR	Title	DIRECTOR
Name	PERRON, PIERRETTE	Name	RADIN, ROBIN
Address	1211 GULF OF MEXICO DRIVE 805	Address	836 EVERGREEN WAY
City-State-Zip:	LONGBOAT KEY FL 34228	City-State-Zip:	LONGBOAT KEY FL 34228
T :4-		Title	DIRECTOR
Title		Name	ROGERS, JAMES
Name	ROCHE, SARITA	Address	3838 BAY SHORE ROAD
Address	PO BOX 25062	City-State-Zip:	SARASOTA FL 34234
City-State-Zip:	SARASOTA FL 34230	T :41 -	
Title	DIRECTOR	Title	DIRECTOR
Name	TESTA, MARY	Name	FRUEH, JOHN
Address	4634 MIRADA WAY	Address	7309 DESERT RIDGE GLEN
, 1301000	22	City-State-Zip:	LAKEWOOD RANCH FL 34202
City-State-Zip:	SARASOTA FL 34238		