

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44674

FILED
Jan 18, 2018
Secretary of State
CC9358141268

Entity Name: SARASOTA SCULLERS YOUTH ROWING PROGRAM, INC.

Current Principal Place of Business:

125 BAYVIEW DR.
OSPREY, FL 34229

Current Mailing Address:

125 BAYVIEW DR.
OSPREY, FL 34229

FEI Number: 65-0280018

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LINGLE, TOM
125 BAYVIEW DR.
OSPREY, FL 34229 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: TOM LINGLE

01/18/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name LINGLE, TOM
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229

Title PRESIDENT
Name KOPLIN, SETH
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229

Title CORRESPONDING SECRETARY
Name BEILER, DAWN
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name NAIDEL, JULIE
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229

Title VP
Name TANAKA, DANIELLE
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name SIMPSON, CHARLES
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name PERE, ROBERT
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name BROWN, GRAEME
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229

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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: TOM LINGLE

TREASURER

01/18/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ANDERSON, JAMES
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name WIEGANDT, KAREN
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229

Title DIRECTOR
Name STEWART, CHRIS
Address 125 BAYVIEW DR.
City-State-Zip: OSPREY FL 34229