2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005568

Entity Name: CIRCUS SARASOTA, INC.

Current Principal Place of Business:

2075 BAHIA VISTA STREET SARASOTA, FL 34239

Current Mailing Address:

2075 BAHIA VISTA STREET SARASOTA, FL 34239 US

FEI Number: 65-0786312

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

REIS, PEDRO 4749 LONGLEAF LANE SARASOTA, FL 34241 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:

Officer/Director Detail :					
Title	TREASURER	Title	CHAIR		
Name	VAN TIEGHEM SR., ALBERT	Name	MCKNIGHT, MITCHELL		
Address	2075 BAHIA VISTA STREET	Address	2075 BAHIA VISTA STREET		
City-State-Zip:	SARASOTA FL 34239	City-State-Zip:	SARASOTA FL 34239		
Title	VC	Title	VC		
Name	DEAN, JACK	Name	MALAWSKY, DONALD		
Address	2075 BAHIA VISTA STREET	Address	2075 BAHIA VISTA STREET		
City-State-Zip:	SARASOTA FL 34239	City-State-Zip:	SARASOTA FL 34239		
Title	SECRETARY	Title	DIRECTOR		
Name	WALK, DEBORAH	Name	JOHNSON, ROBERT		
Address	2075 BAHIA VISTA STREET	Address	2075 BAHIA VISTA STREET		
City-State-Zip:	SARASOTA FL 34239	City-State-Zip:	SARASOTA FL 34239		
Title	DIRECTOR	Title	DIRECTOR		
Name	BROWN, JACK	Name	CARSON, LINDA		
Address	2075 BAHIA VISTA STREET	Address	2075 BAHIA VISTA STREET		
City-State-Zip:	SARASOTA FL 34239	City-State-Zip:	SARASOTA FL 34239		

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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: PEDRO REIS

DIRECTOR

04/03/2013

Electronic Signature of Signing Officer/Director Detail

Date

FILED Apr 03, 2013 Secretary of State CC8865457565

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	FRACZAK, LARRY	Name	LIEVING, LARRY
Address	2075 BAHIA VISTA STREET	Address	2075 BAHIA VISTA STREET
City-State-Zip:	SARASOTA FL 34239	City-State-Zip:	SARASOTA FL 34239
Title	DIRECTOR	Title	DIRECTOR
Name	LOUGHLIN, JOHN	Name	PALMER, LOU ANN
Address	2075 BAHIA VISTA STREET	Address	2075 BAHIA VISTA STREET
City-State-Zip:	SARASOTA FL 34239	City-State-Zip:	SARASOTA FL 34239
Title	DIRECTOR	Title	DIRECTOR
Name	REIS, PEDRO	Name	THAYER, COLLEEN
Address	2075 BAHIA VISTA STREET	Address	2075 BAHIA VISTA STREET
City-State-Zip:	SARASOTA FL 34239	City-State-Zip:	SARASOTA FL 34239
Title	DIRECTOR		

2075 BAHIA VISTA STREET City-State-Zip: SARASOTA FL 34239

SALVATORI, KATHERINE

Name

Address