

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005568

FILED
Jan 25, 2017
Secretary of State
CC6561582416

Entity Name: THE CIRCUS ARTS CONSERVATORY, 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

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REIS, PEDRO
2075 BAHIA VISTA STREET
SARASOTA, FL 34239 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VC
Name DEAN, JACK
Address 2075 BAHIA VISTA STREET
City-State-Zip: SARASOTA FL 34239

Title CHAIRMAN
Name BROWN, JACK
Address 2075 BAHIA VISTA STREET
City-State-Zip: SARASOTA FL 34239

Title SECRETARY
Name WALK, DEBORAH
Address 2075 BAHIA VISTA STREET
City-State-Zip: SARASOTA FL 34239

Title DIRECTOR
Name CARSON, LINDA
Address 2075 BAHIA VISTA STREET
City-State-Zip: SARASOTA FL 34239

Title DIRECTOR
Name REIS, PEDRO
Address 2075 BAHIA VISTA STREET
City-State-Zip: SARASOTA FL 34239

Title DIRECTOR
Name THAYER, COLLEEN
Address 2075 BAHIA VISTA STREET
City-State-Zip: SARASOTA FL 34239

Title TREASURER
Name MANTIA, BRUCE
Address 2075 BAHIA VISTA STREET
City-State-Zip: SARASOTA FL 34239

Title DIRECTOR
Name LOWTHER, BARTON
Address 2075 BAHIA VISTA STREET
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

CEO

01/25/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KONA, SOUMYA
Address 2075 BAHIA VISTA STREET
City-State-Zip: SARASOTA FL 34239