

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000066224

Entity Name: IMAGINE SCHOOL AT SARASOTA, LLC**Current Principal Place of Business:**6220 MCINTOSH ROAD
SARASOTA, FL 34238**Current Mailing Address:**1900 GALLOWS RD
SUITE 250
VIENNA, VA 22182 US**FEI Number:** 26-3328979**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN ST
SUITE 4
TALLAHASSEE, FL 32301 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**Authorized Person(s) Detail :**

Title	MANAGER, CHAIR
Name	SCHANNAULT, SAMANTHA
Address	2506 159TH PLACE E.
City-State-Zip:	PARRISH FL 34219
Title	MANAGER
Name	FAUST, CHRISTINA
Address	4803 WINDY HAMMOCK WAY
City-State-Zip:	PALMETTO FL 34221

Title	MANAGER
Name	FLEMING, APRIL
Address	7333 FOX TROTting RIAD
City-State-Zip:	SARASOTA FL 34241
Title	MANAGER
Name	MILLER, ALLISON
Address	3844 PRAIRIE DUNES DRIVE
City-State-Zip:	SARASOTA FL 34238

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SAMANTHA SCHANNAULT

CHAIR

03/08/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date