

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 705654**

1. Entity Name

RINGLING SCHOOL OF ART AND DESIGN, INC.**FILED**
Feb 11, 2000 8:00 am
Secretary of State

02-11-2000 90023 005 ****70.00

Principal Place of Business

Mailing Address

**2700 N. TAMiami TrL
SARASOTA FL 34234****2700 N. TAMiami TrL
SARASOTA FL 34234-5812**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0637903Applied For
Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**KIMBROUGH, ROBERT
1530 CROSS ST.
SARASOTA FL 33577-3715**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | Delete |
|-------|---------------------------|--------------------------------|-----------------------|-------------------------------------|
| PD | CHRIST-JANER, ARLAND F DR | 2700 N. TAMiami TRAIL | SARASOTA FL 34234 | <input checked="" type="checkbox"/> |
| C | KIRTLEY, WILLIAM T. | 2940 S. TAMiami TRAIL | SARASOTA FL 34239 | <input type="checkbox"/> |
| T | SMITH, ERNEST | 2494 DICK WILSON DRIVE | SARASOTA FL 34240 | <input type="checkbox"/> |
| D | KIMBROUGH, ROBERT A. | 1530 CROSS ST | SARASOTA FL 34236 | <input type="checkbox"/> |
| VCD | KEATING, ELAINE | 4134 GULF OF MEXICO DR, STE 10 | LONGBOAT KEY FL 34228 | <input type="checkbox"/> |
| S | KORCHECK, STEPHEN J DR | 6424 FOX HUNT LANE | BRADENTON FL 34202 | <input type="checkbox"/> |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | Change |
|-----------|-----------------------|-----------------------|--------------------|-------------------------------------|
| President | Thompson, Larry R. DR | 2700 N. Tamiami Trail | Sarasota, FL 34234 | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED**1-27-00**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #