

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007144

FILED  
Mar 27, 2012  
Secretary of State

**Entity Name:** SARASOTA SUNCOAST ACADEMY, INC.

**Current Principal Place of Business:**

8084 HAWKINS ROAD  
SARASOTA, FL 34241

**New Principal Place of Business:**

**Current Mailing Address:**

8084 HAWKINS ROAD  
SARASOTA, FL 34241

**New Mailing Address:**

**FEI Number:** 22-3872632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BAUCOM, LARRY M PHD  
8000 HAWKINS ROAD  
SARASOTA, FL 34241 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: DR  
Name: BAUCOM, LARRY M  
Address: 7821 SADDLE CREEK TRAIL  
City-St-Zip: SARASOTA, FL 34241

Title: MR  
Name: BURKS, MITCHELL  
Address: 5342 CLARK ROAD  
City-St-Zip: SARASOTA, FL 34233

Title: MR  
Name: GRINER, GREG  
Address: 181 ROSELLE COURT  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: MR  
Name: MILLER, BRIAN  
Address: 3821 PRAIRIE DUNES DRIVE  
City-St-Zip: SARASOTA, FL 34233

Title: DR  
Name: PERCIVAL, CHARLES  
Address: 3278 BROCKTON LANE  
City-St-Zip: SARASOTA, FL 34239

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: LARRY BAUCOM

DR

03/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date