

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 764035

**Entity Name:** SARASOTA CONVENTION AND VISITORS BUREAU, INC.

**FILED**  
**Feb 07, 2023**  
**Secretary of State**  
**8084518059CC**

**Current Principal Place of Business:**

301 N. CATTLEMEN ROAD  
SUITE 203  
SARASOTA, FL 34232

**Current Mailing Address:**

301 N. CATTLEMEN ROAD  
SUITE 203  
SARASOTA, FL 34232 US

**FEI Number:** 59-2189967

**Certificate of Status Desired:** No

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

HALEY, VIRGINIA J  
301 N. CATTLEMEN ROAD  
SUITE 203  
SARASOTA, FL 34232 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 IMMEDIATE PAST CHAIRMAN  
Name JOHNSON, CHRISTINE  
Address 301 N. CATTLEMEN ROAD  
SUITE 203  
City-State-Zip: SARASOTA FL 34232

Title CHAIRMAN  
Name MAVRIKAS, NICK  
Address 301 N. CATTLEMEN ROAD  
SUITE 203  
City-State-Zip: SARASOTA FL 34232

Title VC  
Name LIANG, LORRIE  
Address 301 N. CATTLEMEN ROAD  
SUITE 203  
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR  
Name CUTSINGER, RON  
Address 301 N. CATTLEMEN ROAD  
SUITE 203  
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR  
Name MORGAN, KARA  
Address 301 N. CATTLEMEN ROAD  
SUITE 203  
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR  
Name GORDON, MARK  
Address 301 N. CATTLEMEN ROAD  
SUITE 203  
City-State-Zip: SARASOTA FL 34232

Title TREASURER  
Name RUSSELL, RICHARD  
Address 301 N. CATTLEMEN ROAD  
SUITE 203  
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR  
Name SANTOS, WES  
Address 301 N. CATTLEMEN ROAD  
SUITE 203  
City-State-Zip: SARASOTA FL 34232

**Continues on page 2**

*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:** NICK MAVRIKAS

CHARIMAN

02/07/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name KONSAVAGE, RICK  
Address 301 N. CATTLEMEN ROAD  
STE 203  
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR  
Name SELF, TIM  
Address 301 N. CATTLEMEN ROAD  
STE 203  
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR  
Name GRANTHON, MICHAEL  
Address 301 N. CATTLEMEN ROAD  
SUITE 203  
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR  
Name FRESCURA, ANN  
Address 301 N. CATTLEMEN ROAD  
STE 203  
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR  
Name LACIVITA, JOHN  
Address 301 N. CATTLEMEN ROAD  
STE 203  
City-State-Zip: SARASOTA FL 34232