#### **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000006826

Entity Name: DIXON SCHOOL OF ARTS AND SCIENCES, INC.

FILED
Jan 27, 2021
Secretary of State
8831411339CC

Date

## **Current Principal Place of Business:**

1201 NORTH H STREET PENSACOLA. FL 32501

## **Current Mailing Address:**

1201 NORTH H STREET PENSACOLA, FL 32501 US

FEI Number: 30-0600414 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

EMMANUEL, BRUNIE 1201 NORTH H STREET PENSACOLA, FL 32501 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: BRUNIE EMMANUEL 01/27/2021

Electronic Signature of Registered Agent

Officer/Director Detail:

Title OFFICER Title ED

Name CHISM, RICH Name CURRY, DONNA

Address 1201 NORTH H STREET Address 1201 NORTH H STREET

City-State-Zip: PENSACOLA FL 32501 City-State-Zip: PENSACOLA FL 32501

Title CHAIRMAN Title O

Name EMMANUEL, BRUNIE Name BENNETT, WENDY

Address 1201 NORTH H STREET Address 1201 NORTH H STREET

City-State-Zip: PENSACOLA FL 32501 City-State-Zip: PENSACOLA FL 32501

Title TREASURER Title SECRETARY
Name GODBEY, TARA Name CARBEN, EMILY

Address 1201 NORTH H STREET Address 1201 NORTH H STREET

City-State-Zip: PENSACOLA FL 32501 City-State-Zip: PENSACOLA FL 32501

Title OFFICER Title OFFICER

Name SJOBERG, CARON Name ENT, KARLA

Address 1201 NORTH H STREET Address 1201 NORTH H STREET

City-State-Zip: PENSACOLA FL 32501 City-State-Zip: PENSACOLA FL 32501

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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: DONNA CURRY EXECUTIVE DIRECTOR 01/27/2021

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

 Title
 OFFICER
 Title
 OFFICER

 Name
 DONALDSON, SANDRA
 Name
 COBB, ADAM

 Address
 1201 N H ST
 Address
 1201 N H ST

City-State-Zip: PENSACOLA FL 32501 City-State-Zip: PENSACOLA FL 32501