#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000006050

Entity Name: CENTER FOR ARCHITECTURE SARASOTA, INC.

FILED
Jan 18, 2016
Secretary of State
CC2667982960

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

265 SOUTH ORANGE AVENUE SARASOTA, FL 34236

### **Current Mailing Address:**

P. O. BOX 598

SARASOTA, FL 34230-0598 US

FEI Number: 46-3116947 Certificate of Status Desired: No

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

SARASOTA FL 34236

SARASOTA FL 34234

GLENDINNING, RENEA M 1990 MAIN STREET, SUITE 801 SARASOTA, FL 34236 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: RENEA M. GLENDINNING 01/18/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

City-State-Zip:

City-State-Zip:

Title DIRECTOR, CHAIRMAN Title DIRECTOR, SECRETARY

Name PETERSON, CYNTHIA Name KEATON, JAMES

Address 1234 1ST STREET Address 3536 EAST FOREST LAKE DRIVE

City-State-Zip: SARASOTA FL 34236 City-State-Zip: SARASOTA FL 34232

TitleDIRECTOR, TREASURERTitleDIRECTOR, VICE CHAIRMANNameGLENDINNING, RENEA M.NameTIMPSON MOTTO, SANDRAAddress1990 MAIN STREET, SUITE 801Address1658 HAWTHORNE STREET

City-State-Zip: SARASOTA FL 34236 City-State-Zip: SARASOTA FL 34239

Title DIRECTOR Title DIRECTOR

Name BARBETTA, JOSEPH Name MCPHEETERS, JAMES-ALLEN

Address 1255 NORTH GULFSTREAM AVENUE, Address 200 SOUTH ORANGE AVENUE

#113 City-State-Zip: SARASOTA FL 34236

Title DIRECTOR Name LOWE PAYING

Name LOWE, DAVID K.
Name WALKER, MICHAEL K.

Address 47 SOUTH PALM AVENUE, SUITE 207

Address 1793 MANGO AVENUE

City-State-Zip: SARASOTA FL 34236

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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: RENEA M. GLENDINNING TREASURER 01/18/2016

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR
Name TAN, PATRICIA

Address 4801 CHERRY LAUREL CIRCLE

City-State-Zip: SARASOTA FL 34241