## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20848

Entity Name: ST. ARMANDS CIRCLE ASSOCIATION, INC.

**FILED** Mar 26, 2021 **Secretary of State** 3256890974CC

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

300 MADISON DR.

SARASOTA, FL 34236-1328

## **Current Mailing Address:**

300 MADISON DR.

SARASOTA, FL 34236-1328

FEI Number: 59-1701241 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

NORTON, SAM D ESQ. 1819 MAIN STREET SUITE 610 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: SAM D. NORTON 03/26/2021

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Address

VP, DIRECTOR OF MARKETING Title Title DIRECTOR OF MEMBERSHIP

SEACE, ERIC VAC. ANDREW Name Name

> 300 MADISON DR. Address 300 MADISON DR 201

201

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

**EMERITUS EXECUTIVE DIRECTOR** SECRETARY/TREASURER Title Title

Name CORRIGAN, DIANA Name MACDONALD, SCOTT

300 MADISON DRIVE Address 300 MADISON DR. Address 201 201

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

Title **PRESIDENT** Title PAST PRESIDENT CLARK, BRUCE GROVER, MATT Name Name

Address 300 MADISON DR. Address 300 MADISON DR. 201

City-State-Zip: SARASOTA FL 34236-1328 SARASOTA FL 34236-1328 City-State-Zip:

Title ED

KRAVITZ-BURNS, RACHEL Name

Address 300 MADISON DR.

SARASOTA FL 34236-1328 City-State-Zip:

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.

03/26/2021 SIGNATURE: DIANA CORRIGAN **EMERITUS ED** 

Electronic Signature of Signing Officer/Director Detail

Date