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

DOCUMENT# N29044

Entity Name: TEEN COURT OF SARASOTA, INC.

**Current Principal Place of Business:** 

101 S WASHINGTON BLVD.

STE 301

SARASOTA, FL 34236

**Current Mailing Address:** 

P. O. BOX 48927

SARASOTA, FL 34230 US

FEI Number: 65-0108304 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MILLER, TONIA 101 S WASHINGTON BLVD. STE 301 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: TONIA MILLER 01/03/2023

Electronic Signature of Registered Agent

Date

**FILED** Jan 03, 2023

**Secretary of State** 

9503513306CC

Officer/Director Detail:

**TREASURER** Title Title **PRESIDENT** MENCHINGER, THOMAS A CPA Name Name MCBRAYER, KATY P. O. BOX 48927 P. O. BOX 48927 Address Address

City-State-Zip: City-State-Zip: SARASOTA FL 34230 SARASOTA FL 34230

Title VΡ Title **EXECUTIVE DIRECTOR** 

Name CAMPAGNA, STEFAN Name TODD, HEATHER Address P. O. BOX 48927 P. O. BOX 48927 Address City-State-Zip: SARASOTA FL 34230

City-State-Zip: SARASOTA FL 34230

Title **DIRECTOR** Title **SECRETARY** CHOKR, AMIR Name Name LEAF, MEGAN Address P. O. BOX 48927 P. O. BOX 48927 Address City-State-Zip: SARASOTA FL 34230

City-State-Zip: SARASOTA FL 34230

Title DIRECTOR Title DIRECTOR COLON, JOHN Name BRYON, LEE Name Address P. O. BOX 48927 P. O. BOX 48927 Address SARASOTA FL 34230

City-State-Zip: SARASOTA FL 34230 City-State-Zip:

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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.

01/03/2023 SIGNATURE: HEATHER TODD **EXECUTIVE DIRECTOR** 

## Officer/Director Detail Continued:

TitleDIRECTORTitleDIRECTORNameHAYES, KENTNameLUKE, JILL

Address P. O. BOX 48927 Address P. O. BOX 48927

City-State-Zip: SARASOTA FL 34230 City-State-Zip: SARASOTA FL 34230

Title DIRECTOR Title DIRECTOR

NamePANAGIOTAKIS, STEVENameWOODRING, BRIANAddressP. O. BOX 48927AddressP. O. BOX 48927

City-State-Zip: SARASOTA FL 34230 City-State-Zip: SARASOTA FL 34230