2019 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:

WALKER, KIMBERLY P 200 SOUTH ORANGE AVENUE 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:

Electronic Signature of Registered Agent

Date

FILED Jan 22, 2019

Secretary of State

5531162689CC

Officer/Director Detail:

Title **SECRETARY** Title **DIRECTOR** Name BALAITY, JESSE R Name JOELS, EMMA J 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 **TREASURER**

Name SLAPP, MARY DOUGHERTY Name MENCHINGER, THOMAS A CPA

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

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

Title DIRECTOR Title **DIRECTOR** DUKE, EVAN Name Name BYRON, LEE 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 **PRESIDENT**

Name PATTERSON, NORA Name HAYES, KENT Address P. O. BOX 48927 Address P. O. BOX 48927

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

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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: HEATHER TODD

Electronic Signature of Signing Officer/Director Detail

EXECUTIVE DIRECTOR

01/22/2019

Date

Officer/Director Detail Continued:

Title DIRECTOR Title VP

Name SWIFT, JANEY Name MCBRAYER, KATY

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

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

Title EXECUTIVE DIRECTOR Title DIRECTOR

NameTODD, HEATHERNameBENNETT, MICHAELAddressP. O. BOX 48927AddressP. O. BOX 48927

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

Title DIRECTOR Title DIRECTOR

Name BRODY, HAGEN Name CAMPAGNA, STEFAN

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

 Name
 COLON, JOHN
 Name
 LUMPKIN, KELVIN

 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

Name PANAGIOTAKIS, STEVE Name HANKS, CHRIS

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

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