2016 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 12, 2016

Secretary of State

CC1511486675

Officer/Director Detail:

TitleSECRETARYTitlePRESIDENTNameBALAITY, JESSE RNameJOELS, EMMA JAddressP. O. BOX 48927AddressP. O. BOX 48927

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

Title DIRECTOR Title TREASURER

Name WALKER, KIMBERLY P Name MENCHINGER, THOMAS A CPA

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

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

Ony Guito 2.19. Grid 100 17. 12 04200

TitleVPTitleDIRECTORNameSLAPP, MARY DOUGHERTYNameBYRON, LEE

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

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

TitleDIRECTORTitleDIRECTORNameDUKE, EVANNameHAYES, KENTAddressP. O. BOX 48927AddressP. 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 EXECUTIVE DIRECTOR 01/12/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

City-State-Zip: SARASOTA FL 34230

Title DIRECTOR Title DIRECTOR Name PATTERSON, NORA Name SWIFT, JANEY Address P. O. BOX 48927 Address P. O. BOX 48927 City-State-Zip: SARASOTA FL 34230

Title EXECUTIVE DIRECTOR Title DIRECTOR

Name TODD, HEATHER Name MCBRAYER, KATY Address P. O. BOX 48927 P. O. BOX 48927 Address

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