

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35246

**Entity Name:** SARASOTA CLASSIFIED/TEACHERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4675 S. TAMIAMI TR.  
SARASOTA, FL 34231

**Current Mailing Address:**

4675 S. TAMIAMI TR.  
SARASOTA, FL 34231

**FEI Number: 59-1147342**

**Certificate of Status Desired: Yes**

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

PATRICIA A. GARDNER  
4675 S. TAMIAMI TRAIL  
SARASOTA, FL 34231 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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GARDNER, PATRICIA A  
Address        4675 S. TAMIAMI TR.  
City-State-Zip: SARASOTA FL 34231

Title            TREASURER  
Name            FITZ, KARYN  
Address        4675 S. TAMIAMI TR.  
City-State-Zip: SARASOTA FL 34231

Title            SECRETARY  
Name            GROSS, VICTORIA  
Address        4675 S. TAMIAMI TR.  
City-State-Zip: SARASOTA FL 34231

Title            VP  
Name            MAYER, CHRIS  
Address        4675 S. TAMIAMI TR.  
City-State-Zip: SARASOTA FL 34231

*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: PATRICIA GARDNER**

**PRESIDENT**

**01/11/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date