2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707412

Entity Name: SUNSHINE CHAPTER OF ELECTRONIC REPRESENTATIVES

ASSOCATION, INC.

Current Principal Place of Business:

1750 W. BROADWAY C/O CONLEY & ASSOCIATES SUITE 222 OVIEDO, FL 32765

Current Mailing Address:

1750 W. BROADWAY C/O CONLEY & ASSOCIATES SUITE 222 OVIEDO, FL 32765 US

FEI Number: 59-6163402 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIETRICH, LISA MAUREEN 1750 W. BROADWAY C/O CONLEY & ASSOCIATES SUITE 222 OVIEDO, FL 32765 US

BROCK, SETH

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: LISA M. DIETRICH 04/01/2023

Electronic Signature of Registered Agent Date

Title

Officer/Director Detail:

Name

Title CHAIRMAN Title TREASURER

Name TALLY, RICK Name DIETRICH, LISA MAUREEN

Address 1103 W. HIBISCUS BLVD. SUITE 308Z Address 1750 W. BROADWAY

City-State-Zip: MELBOURNE FL 32901 C/O CONLEY & ASSOCIATES SUITE

Title CHAIRMAN City-State-Zip: OVIEDO FL 32765

Name BAMBERG, PAT Title PRESIDENT

Address 214 COCOS DRIVE Name WARREN , GREG
City-State-Zip: ORLANDO FL 32807 Address 225 LAKE DRIVE

City-State-Zip: OVIEDO FL 32765

Title VP

Address 31629 LONG ACRES DRIVE Name RECICAR, SHANE

City-State-Zip: SORRENTO FL 32776 Address 31629 LONG ACRES DRIVE

City-State-Zip: SORRENTO FL 32776

SECRETARY

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: LISA DIETRICH TREASURER 04/01/2023

FILED Apr 01, 2023

Secretary of State

8237283731CC