2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707412

Entity Name: SUNSHINE CHAPTER OF ELECTRONIC REPRESENTATIVES

ASSOCATION, INC.

FILED Apr 01, 2023 Secretary of State 8237283731CC

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:

MELBOURNE FL 32901

DIETRICH, LISA MAUREEN 1750 W. BROADWAY C/O CONLEY & ASSOCIATES SUITE 222 OVIEDO, FL 32765 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: LISA M. DIETRICH 04/01/2023

> Date Electronic Signature of Registered Agent

> > Title

Officer/Director Detail:

Title **CHAIRMAN** Title **TREASURER**

TALLY, RICK Name Name DIETRICH, LISA MAUREEN

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

C/O CONLEY & ASSOCIATES SUITE

222

City-State-Zip: OVIEDO FL 32765

Title **CHAIRMAN** Title **PRESIDENT** BAMBERG, PAT

Name WARREN, GREG 214 COCOS DRIVE Address Address 225 LAKE DRIVE

City-State-Zip: ORLANDO FL 32807 City-State-Zip: OVIEDO FL 32765

VΡ Title

City-State-Zip:

Name

Name BROCK, SETH

Name RECICAR, SHANE 31629 LONG ACRES DRIVE Address

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

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.