

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744469

Entity Name: FLORIDA SOCIETY OF ENROLLED AGENTS, INC.**Current Principal Place of Business:**10570 S US HIGHWAY 1
STE 203
PORT ST. LUCIE, FL 34695**Current Mailing Address:**P O BOX 882084
PORT ST. LUCIE, FL 34988 US**FEI Number:** 59-1853783**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PENA EA, VIRGINIA
10570 S US HIGHWAY 1
STE 203
PORT ST. LUCIE, FL 34695 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:** VIRGINIA PENA EA

01/10/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title IMMEDIATE PAST PRESIDENT
Name SCHNEIDER EA, JEFFREY
Address PO BOX 882084
City-State-Zip: PORT ST. LUCIE FL 34988

Title PRESIDENT
Name MIDWOOD EA, TWILA
Address 3819 MURRELL RD, STE E
City-State-Zip: ROCKLEDGE FL 32955

Title TREASURER
Name PENA EA, VIRGINIA
Address PO BOX 2408
City-State-Zip: OLDSMAR FL 34677

Title PRESIDENT ELECT
Name CARLISLE EA, MICHAEL
Address 204 N MACDILL AVENUE
City-State-Zip: TAMPA FL 33609

Title SECRETARY
Name GOSNELL EA, STACIE
Address 6022 FARCENDA PLACE
101
City-State-Zip: MELBOURNE FL 32940

Title VP
Name PONS EA, ROBERTO
Address 6625 MIAMI LAKES DR
SUITE 228
City-State-Zip: MIAMI LAKES FL 33014

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: VIRGINIA PENA EA

TREASURER

01/10/2015

Electronic Signature of Signing Officer/Director Detail

Date