

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# 744469

**Entity Name:** FLORIDA SOCIETY OF ENROLLED AGENTS, INC.

**Current Principal Place of Business:**

16115 SW 117 AVE  
STE 24  
MIAMI, FL 33177

**Current Mailing Address:**

16115 SW 117TH AVE  
STE 24  
MIAMI, FL 33177 US

**FEI Number:** 59-1853783

**Certificate of Status Desired:** No

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

ABERCROMBIE, EA, WRAY  
16115 SW 117TH AVE  
STE 24  
MIAMI, FL 33177 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:** WRAY ABERCROMBIE, EA

06/22/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            VITRAELLI, RICHARD EA  
Address        1125 S. MYRTLE AVE.  
City-State-Zip: CLEARWATER FL 33756

Title            SECRETARY  
Name            RODEN, KATHLEEN EA  
Address        140 MAPLEWOOD AVE.  
City-State-Zip: COCOA FL 32926

Title            TREASURER  
Name            BEESON, WILLIAM EA  
Address        3008 SURFSIDE WAY  
City-State-Zip: ORLANDO FL 32805

Title            VP  
Name            ABIKARRAM, JESUS EA  
Address        600 W HALLANDALE BEACH BLVD  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            IMMEDIATE PAST PRESIDENT  
Name            ABERCROMBIE, WRAY EA  
Address        16115 SW 117TH AVE  
STE 24  
City-State-Zip: MIAMI FL 33177

Title            EXECUTIVE VICE PRESIDENT  
Name            LONSWAY, MICHELLE EA  
Address        PO BOX 100577  
City-State-Zip: PALM BAY FL 32910

Title            PRESIDENT ELECT  
Name            HUNTLEY, ROBBIN RAE EA  
Address        400 FRANDORSON CIRCLE  
SUITE 103  
City-State-Zip: APOLLO BEACH, FL 33572

*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:** WRAY ABERCROMBIE

IPP

06/22/2023

Electronic Signature of Signing Officer/Director Detail

Date