2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2020
Secretary of State
6926434247CC

DOCUMENT# 751959

Entity Name: FLORIDA SOCIETY OF PERIANESTHESIA NURSES, INCORPORATED

Current Principal Place of Business:

4413 EAST RIVERSIDE DR
FORT MYERS, FL 33905

Current Mailing Address:

4413 EAST RIVERSIDE DR
FORT MYERS, FL 33905 US

FEI Number: 59-1759997

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JEFFERS, CHERYL
27 W. FILMORE ST.
ORLANDO, FL 32809 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: CHERYL JEFFERS 01/06/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	IMMEDIATE PAST PRESIDENT
Name	CANTRELL, KRISTEN
Address	10491 CASANOVA DRIVE
City-State-Zip:	TALLAHASSEE FL 32317

Title	SECRETARY
Name	GALURA, SANDY
Address	2312 MONTANA ST.
City-State-Zip:	ORLANDO FL 32803

Title	TEASURER
Name	MARSHALL, LIEFJE
Address	4413 EAST RIVERSIDE DR
City-State-Zip:	FORT MYERS FL 33905

Title	PRESIDENT ELECT-VP
Name	GODFREY, KIM
Address	14091 FALCON CREST DR.
City-State-Zip:	JACKSONVILLE FL 32224

Title	PRESIDENT
Name	DAVIDSON, MELISSA
Address	1411 FORT COBB TERRACE
City-State-Zip:	WESLEY CHAPEL FL 33543

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: LIEFJE MARSHALL TREASURER 01/06/2020

Electronic Signature of Signing Officer/Director Detail — Date