

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

DOCUMENT# 770604

**Entity Name:** FLORIDA ALPHA ALUMNI OF SIGMA PHI EPSILON, INC.

**Current Principal Place of Business:**

2290 MUSEUM ROAD  
GAINESVILLE, FL 32610

**Current Mailing Address:**

PO BOX 12182  
GAINESVILLE, FL 32604 US

**FEI Number: 59-6141908**

**Certificate of Status Desired: Yes**

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

CATLEDGE, WESLEY WAYNE JR.  
842 NW 52 TERR  
GAINESVILLE, FL 32605 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: WESLEY WAYNE CATLEDGE**

**05/16/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name RIDGWAY, BRYSON  
Address 1004 SE 6TH STREET  
City-State-Zip: FORT LAUDERDALE FL 33301

Title TREASURER  
Name CATLEDGE, WESLEY WAYNE JR.  
Address 842 NW 52 TERR  
City-State-Zip: GAINESVILLE FL 32605

Title PRESIDENT  
Name VARGAS, MANNY  
Address 609 NE 16TH TER  
City-State-Zip: FORT LAUDERDALE FL 33304

Title VP, FACILITIES  
Name SANDSTROM, JOHN  
Address 4047 SW 57TH AVE  
City-State-Zip: OCALA FL 34474

Title VP, COMMUNICATIONS  
Name FERNANDEZ TORRES, LUIS ENRIQUE  
Address 103 G ST SW  
B415  
City-State-Zip: WASHINGTON DC 20024

*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: WESLEY CATLEDGE**

**TREASURER**

**05/16/2023**

Electronic Signature of Signing Officer/Director Detail

Date