#### 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. 02/27/2019

#### SIGNATURE: KARLA C. AYER

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N0600002661

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: SODALITAS S. MARIA AEGYPTIACA, INC.

## **Current Principal Place of Business:**

1048 CHEYENNE DR. ST. AUGUSTINE FL 32086

#### **Current Mailing Address:**

1048 CHEYENNE DR. ST. AUGUSTINE FL 32086

## FEI Number: 86-1162363

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

AYER, KARLA C. 1048 CHEYENNE DR. ST. AUGUSTINE, FL 32086 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:

#### **Officer/Director Detail :** Title DS Title DP AYER, KARLA C. MOORE, N Name Name 1048 CHEYENNE DR. Address 1048 CHEYENNE DR. Address City-State-Zip: ST. AUGUSTINE FL 32086 ST. AUGUSTINE FL 32086 City-State-Zip: Title DV BEAZLEY, L Name Address 1048 CHEYENNE DR. ST. AUGUSTINE FL 32086 City-State-Zip:

DS

# FILED Feb 27, 2019 Secretary of State 9368944124CC

Certificate of Status Desired: No

Date

Date