

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06542

**Entity Name:** THE FLORIDA SOCIETY OF ASSOCIATION EXECUTIVES FOUNDATION, INC.

**FILED**  
**Jan 11, 2021**  
**Secretary of State**  
**1198758313CC**

**Current Principal Place of Business:**

2410 MAHAN DR.  
SUITE 2  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

2410 MAHAN DR.  
SUITE 2  
TALLAHASSEE, FL 32308 US

**FEI Number: 59-2485277**

**Certificate of Status Desired: No**

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

RUDD, FRANK H  
2410 MAHAN DR.  
SUITE 2  
TALLAHASSEE, FL 32308 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: FRANK H. RUDD**

**01/11/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title FSAE PRESIDENT/CEO  
Name RUDD, FRANK  
Address 2410 MAHAN DRIVE  
SUITE 2  
City-State-Zip: TALLAHASSEE FL 32308

Title PAST CHAIR  
Name AYOTTE, JAMES  
Address 1284 TIMBERLANE RD  
City-State-Zip: TALLAHASSEE FL 32312

Title CHAIR  
Name POWELL, LONNY  
Address 801 SW 60TH AVE  
City-State-Zip: OCALA FL 34474

Title SECRETARY  
Name CALDWELL, JAIME  
Address 1855 GRIFFIN RD, STE A-415  
City-State-Zip: DANIA BEACH FL 33004

Title CHAIR-ELECT  
Name SIMINOVSKY, GAIL  
Address PO BOX 8667  
City-State-Zip: CORAL SPRINGS FL 33075

Title TREASURER  
Name SON, DONNA  
Address 3800 ESPLANADE WAY  
STE 210  
City-State-Zip: TALLAHASSEE FL 32311

*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: FRANK RUDD**

**PRESIDENT/CEO**

**01/11/2021**

Electronic Signature of Signing Officer/Director Detail

Date