

**2021 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N08000005735

**Entity Name:** F O E AUXILIARY SARA-MANA 4424 INC.

**Current Principal Place of Business:**

8347 LOCKWOOD RIDGE RD  
SARASOTA, FL 34243

**Current Mailing Address:**

8347 LOCKWOOD RIDGE RD  
SARASOTA, FL 34243 US

**FEI Number:** 65-0995838

**Certificate of Status Desired:** Yes

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

EDWARDS, CAROL NELSON  
720 S TUTTLE AVE  
SARASOTA, FL 34237 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:** CINDY HICKS

04/15/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title S  
Name EDWARDS, CAROL  
Address 720 S. TUTTLE AVE  
City-State-Zip: SARASOTA FL 34237

Title P  
Name LELAND, GAYLE J  
Address 620 57TH AVE W - LOT C15  
City-State-Zip: BRADENTON FL 34207

Title VP  
Name PARISH, MARIE  
Address 11927 MOCCAISIN WALLOW ROAD  
City-State-Zip: PARISH FL 34219

Title T  
Name SMITH, SHARON  
Address 4328 SAGE GRAIN TERRACE  
City-State-Zip: SARASOTA FL 34243

*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:** CAROL EDWARDS

**SECRETARY**

04/15/2021

Electronic Signature of Signing Officer/Director Detail

Date