

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

DOCUMENT# N09000003938

**Entity Name:** SUNCOAST CHAPTER OF THE INTERNATIONAL FACILITY  
MANAGEMENT ASSOCIATION, INC.

**FILED**  
**Apr 17, 2023**  
**Secretary of State**  
**3652084925CC**

**Current Principal Place of Business:**

800 GESSNER RD  
STE 900  
HOUSTON, TX 77024

**Current Mailing Address:**

800 GESSNER RD  
STE 900  
HOUSTON, TX 77024 US

**FEI Number: 59-2663460**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            OLSON, AMY  
Address        PO BOX 13723  
City-State-Zip: MIAMI FL 33101

Title            TREASURER  
Name            ACEVES, STEFANY  
Address        3201 NORTH FLORIDA AVE  
City-State-Zip: TAMPA FL 33603

Title            SECRETARY  
Name            DANO, MARCO  
Address        1500 MONROE ST  
City-State-Zip: FORT MYERS FL 33901

Title            DIRECTOR  
Name            STEWART, LINDSEY  
Address        800 GESSNER RD  
                  STE 900  
City-State-Zip: HOUSTON TX 77024

Title            DIRECTOR  
Name            RESSLER, MARY  
Address        800 GESSNER  
                  STE 900  
City-State-Zip: HOUSTON TX 77024

*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: MARY RESSLER**

**DIRECTOR**

**04/17/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date