2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000005928

Entity Name: PSR/FLORIDA CHAPTER, CORP.

Current Principal Place of Business:

4520 W. OAKELLAR AVE #13901

TAMPA FL 33611

Current Mailing Address:

4520 W. OAKELLAR AVE#13901 PO BOX 13901 TAMPA FL 33611 US

FEI Number: 46-0985992

Name and Address of Current Registered Agent: WILLIAMS, SANDRA J.

550 NORTH REO STREET SUITE 300

TAMPA, FL 33609-1065 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: SANDRA J. WILLIAMS, CPA, PA 04/01/2019

Electronic Signature of Registered Agent

Date

FILED Apr 01, 2019

Secretary of State

5565297104CC

Certificate of Status Desired: No.

Officer/Director Detail:

Title D Title **TREASURER**

SAFF, RON Name Name RINGENBERG, LYNN MD

Address 4520 W. OAKELLAR AVE #13901 Address 4520 W. OAKELLAR AVE#13901

PO BOX 13901

DUNN, MARYBETH

City-State-Zip: TAMPA FL 33611 **TAMPA FL 33611** City-State-Zip:

Title **PRESIDENT**

Title Name BIEHLER, JEFRY L

Name FLEISCHER, JEANNETTE Address 4520 W. OAKELLAR AVE #13901

4520 W. OAKELLAR AVE #13901 Address

City-State-Zip: **TAMPA FL 33611 TAMPA FL 33611** City-State-Zip:

Title

Address

Title DIRECTOR Name GERIEGE, RANI S

Address 4520 W. OAKELLAR AVE #13901 4520 W. OAKELLAR AVE#13901 Address

Name

City-State-Zip: **TAMPA FL 33611** PO BOX 13901

City-State-Zip: TAMPA FL 33611

Title **DIRECTOR**

Title DIRECTOR Name DRAPER, LONNIE Name SACK, TODD

4520 W. OAKELLAR AVE #13901 Address

TAMPA FL 33611 City-State-Zip:

City-State-Zip: TAMPA FL 33611

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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.

04/01/2019 **EXECUTIVE DIRECTOR** SIGNATURE: MARYBETH DUNN

Electronic Signature of Signing Officer/Director Detail

4520 W. OAKELLAR AVE #13901

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name KESSLER, HOWARD Name BANSAL, ANKUSH

Address 4520 W. OAKELLAR AVE #13901 Address 4520 W. OAKELLAR AVE #13901

PO BOX 13901

City-State-Zip: TAMPA FL 33611

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