

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000008812

Entity Name: 4EVER40 SISTERHOOD ASSOCIATION, INC.**Current Principal Place of Business:**13215 WASHINGTON AVE
LARGO, FL 33773**Current Mailing Address:**13215 WASHINGTON AVE
LARGO, FL 33773 US**FEI Number:** 46-1222438**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DEMILLE, ROSABELLA E
13215 WASHINGTON AVE
LARGO, FL 33773 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:** ROSABELLA E. DEMILLE

03/02/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name BAUMGARTNER, ELEANORE DIANA
Address 5500 72ND AVENUE N.
City-State-Zip: PINELLAS PARK FL 33781

Title ASST. TREASURER
Name NERI, RAMON
Address 2019 MUIRFIELD WAY
City-State-Zip: OLDSMAR FL 34677

Title VP-EVENT
Name BARRIDO, EMMA
Address 2890 PHILIPPE PARKWAY
City-State-Zip: SAFETY HARBOR FL 34695

Title ASST. SECRETARY
Name COLEY, LYNN
Address 1511 ARIES LANE
City-State-Zip: CLEARWATER FL 33755

Title FOUNDER/ACTING VP PROGRAM
SERVICES
Name DEMILLE, ROSABELLA E
Address 13215 WASHINGTON AVE
City-State-Zip: LARGO FL 33773

Title PRESIDENT
Name ANTONIO, CYNTHIA
Address 629 HAVEN PLACE
City-State-Zip: TARPON SPRINGS FL 34689

Title PUBLIC RELATION OFFICER
Name CRUZ, EMILIO INDUCIL
Address 8345 WRENS WAY
City-State-Zip: LARGO FL

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: ROSABELLA E. DEMILLE

FOUNDER

03/02/2022

Electronic Signature of Signing Officer/Director Detail

Date