

2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N17000002482

Entity Name: SURVIVORS OF SUBSTANCE ABUSE, INCORPORATED

Current Principal Place of Business:

4600 TWIN OAKS DR., APT #513
PENSACOLA, FL 32506

Current Mailing Address:

4600 TWIN OAKS DR., APT #513
PENSACOLA, FL 32506 UN

FEI Number: 82-5177832

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSON, ROBERT E
4600 TWIN OAKS DR., APT #513
PENSACOLA, FL 32506 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: ROBERT E. JOHNSON

03/30/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name JOHNSON, ROBERT E
Address 4600 TWIN OAKS DR., APT #513
City-State-Zip: PENSACOLA FL 32506

Title VP
Name WHITE, DIANE M
Address 5001 GRANDE DR., APT #1023
City-State-Zip: PENSACOLA FL 32504

Title SEC
Name VICKI, YELDER D
Address P.O. BOX 10447
City-State-Zip: PENSACOLA FL 32524

Title TREA
Name ERETHA, DILLARD V
Address P.O. BOX 10255
City-State-Zip: PENSACOLA FL 32504

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: ROBERT E. JOHNSON

PRESIDENT

03/30/2019

Electronic Signature of Signing Officer/Director Detail

Date