## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000011169

Entity Name: SOMERSET MINI SPARTANS PTSO INC.

**FILED** Sep 06, 2019 **Secretary of State** 7270943614CC

## **Current Principal Place of Business:**

4402 SW YAMADA DR PORT ST. LUCIE. FL 34953

## **Current Mailing Address:**

841 SW MCCRACKEN AVE PORT ST. LUCIE. FL 34953 US

FEI Number: 82-2925729 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

JOHNSON, AMANDA NICOLE 841 SW MCCRACKEN AVE PORT ST. LUCIE, FL 34953 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: AMANDA NICOLE JOHNSON 09/06/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title VΡ

AIELLO, JENNIFER Name EIBEN, BRITTANY Name

62 SE SEAHOUSE DR Address 1598 SW JANETTE AVE Address

City-State-Zip: PORT ST LUCIE FL 34952 PORT ST. LUCIE FL 34983 City-State-Zip:

Title **TRES** Title **SECRETARY** 

Name JOHNSON, AMANDA Name JONES, JESSICA

Address 841 SW MCCRACKEN AVE Address 942 SW KAPPA AVE PORT ST. LUCIE FL 34953 City-State-Zip:

Title **OTHER** 

City-State-Zip:

Name MARTINEZ, DANAY 1061 SE SANDIA DR Address

City-State-Zip: PORT ST. LUCIE FL 34983

PORT SAINT LUCIE FL 34953

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.

09/06/2019 SIGNATURE: AMANDA JOHNSON **TREASURER**