

2021 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N19000006674

Entity Name: SENSORY ACADEMY OF LEARNING & TECHNOLOGY INC**Current Principal Place of Business:**2 GROVE CT SE
WINTER HAVEN, FL 33884**Current Mailing Address:**6039 CYPRESS GARDENS BLVD, 164
WINTER HAVEN, FL 33884 US**FEI Number:** 47-4099864**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PHARNES, MARLYNN PATRAY
2 GROVE CT SE
WINTER HAVEN, FL 33884 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:** MARLYNN PATRAY PHARNES

09/29/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title S, PRESIDENT

Name NORSWORTHY, ERIN

Address 114 W STRICKLAND ST.

City-State-Zip: PLANT CITY FL 33563

Title VP

Name ROUSEFF, REBECCA

Address 330 SALLY LEE DR.

City-State-Zip: ELLENTON FL 34222

Title SECRETARY, TREASURER

Name YODER, ALYSSA

Address 1009 W LAKE MARTHA DR

City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR

Name PHARNES, MARLYNN

Address 2 GROVE CT SE

City-State-Zip: WINTER HAVEN FL 33884

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: MARLYNN PATRAY PHARNES**DIRECTOR**

09/29/2021

Electronic Signature of Signing Officer/Director Detail

Date