## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36977

Entity Name: SOCIETY FOR THE TECHNOLOGICAL ADVANCEMENT OF

REPORTING, INC.

NOEMENT OF

FILED Mar 27, 2018 Secretary of State CC0564617411

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

222 S. WESTMONTE DR. #111 ALTAMONTE SPRINGS, FL 32714

## **Current Mailing Address:**

222 S. WESTMONTE DR. #111 ALTAMONTE SPRINGS, FL 32714 US

FEI Number: 59-3308744 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WENHOLD, DAVE 222 S. WESTMONTE DR., #111 ALTAMONTE SPRINGS, FL 32714 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: DAVE WENHOLD 03/27/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title TD Title ASST. ED

Name MOBLEY, TODD Name THOMPSON, KATHY

Address 334 S. MAIN ST Address 222 S WESTMONTE DR # 111

City-State-Zip: DAYTON OH 45402 City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title SECRETARY Title IMMEDIATE PAST PRESIDENT

Name CONNOR, JAMES Name FIFIELD, LINDA S

Address 1650 ONE AMERICAN SQUARE Address 50 FRANKLIN ST 3RD FLR #300

City-State-Zip: INDIANAPOLIS IN 46282 City-State-Zip: BOSTON MA 02110

Title PRESIDENT

Name HUMPHREY-SONNTAG, MELANIE
Address TIMBERS PROFESSIONAL CENTER

City-State-Zip: ST. CHARLES IL 60174

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: KATHY THOMPSON

ASST. ED

03/27/2018