

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000425

Entity Name: SUNSHINE STATE TEACHERS OF ENGLISH TO SPEAKERS OF
OTHER LANGUAGES (TESOL) OF FLORIDA, INC.**FILED**
Apr 08, 2019
Secretary of State
7291569915CC**Current Principal Place of Business:**SS-TESOL C/O CYNTHIA SCHUEMANN
4801 RIVERSIDE DR.
YANKEETOWN, FL 34498**Current Mailing Address:**SS-TESOL C/O CYNTHIA SCHUEMANN
4801 RIVERSIDE DR.
YANKEETOWN, FL 34498 US**FEI Number: 59-1846978****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GOUSSAKOVA, EKATERINA V
13918 OCEAN PINE CIRCLE
ORLANDO, FL 32828 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: EKATERINA GOUSSAKOVA****04/08/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	MICHELLE , PLOETZ
Address	1439 NW 17TH STREET
City-State-Zip:	HOMESTEAD FL 33030

Title	TREASURER
Name	GOUSSAKOVA, EKATERINA
Address	13918 OCEAN PINE CIRCLE
City-State-Zip:	OLANDO FL 32828

Title	VP, 1ST
Name	COSTELLO, ARLENE
Address	3690 WIMBLEDON DR.
City-State-Zip:	PENSACOLA FL 32504

Title	RECEIVING SECRETARY
Name	SCHUEMANN, CYNTHIA
Address	4801 RIVERSIDE DR.
City-State-Zip:	YANKEETOWN FL 34498

Title	TREASURER ELECT
Name	MUKHERJEE, KEYA
Address	6314 CHAUNCY STREET
City-State-Zip:	TAMPA FL 33647

Title	VP, 2ND
Name	PONTIER, RYAN
Address	6471 SW 42ND STREET
City-State-Zip:	MIAMI FL 33155

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: EKATERINA V. GOUSSAKOVA**TREASURER****04/08/2019**

Electronic Signature of Signing Officer/Director Detail

Date