

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000328

Entity Name: FLORIDA ASSOCIATION FOR THE TREATMENT OF SEXUAL ABUSERS, INC.**FILED**
Apr 09, 2021
Secretary of State
8147708177CC**Current Principal Place of Business:**8800 49TH ST. N.
SUITE 311
PINELLAS PARK, FL 33782**Current Mailing Address:**8800 49TH ST. N.
SUITE 311
PINELLAS PARK, FL 33782 US**FEI Number: 59-3380952****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ROYALL, WILLIAM L
8800 49TH ST. N.
SUITE 311
PINELLAS PARK, FL 33782 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:** WILLIAM L ROYALL, JR.**04/09/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	GERENA, JULIANA
Address	8800 49TH STREET N. SUITE 311
City-State-Zip:	PINELLAS PARK FL 33782

Title	SECRETARY
Name	PARHAM, ROBERT
Address	8800 49TH ST. N. SUITE 311
City-State-Zip:	PINELLAS PARK FL 33782

Title	DIRECTOR
Name	LEVENSON, JILL
Address	8800 49TH ST. N. SUITE 311
City-State-Zip:	PINELLAS PARK FL 33782

Title	TREASURER
Name	ROYALL, WILLIAM L
Address	8800 49TH ST. N. SUITE 311
City-State-Zip:	PINELLAS PARK FL 33782

Title	PAST PRESIDENT
Name	DEITCHMAN, GEORGE
Address	8800 49TH ST. N. SUITE 311
City-State-Zip:	PINELLAS PARK FL 33782

Title	DIRECTOR
Name	GOMEZ, KATHERINE
Address	8800 49TH ST. N. SUITE 311
City-State-Zip:	PINELLAS PARK FL 33782

Title	DIRECTOR
Name	MILLER, PAM
Address	8800 49TH ST. N. SUITE 311
City-State-Zip:	PINELLAS PARK FL 33782

Title	PRESIDENT
Name	MORRIS, RICK
Address	8800 49TH ST. N. SUITE 311
City-State-Zip:	PINELLAS PARK FL 33782

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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: WILLIAM ROYALL**TREASURER****04/09/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	FORIS, BROOKE
Address	8800 49TH ST. N. SUITE 311
City-State-Zip:	PINELLAS PARK FL 33782