Current Prin	: STATE BOARD OF ADMINISTRATION FINA cipal Place of Business: GE BLVD. SUITE 100 , FL 32308	NCE CORPO	RATION Secretary of 39361053	
Current Mail	ing Address:			
	TAGE BLVD. SUITE 100 EE, FL 32308 US			
FEI Number: 59-3427843			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
HAZEN, MAUREEN M GENERAL COUNSEL,STATE BOARD OF ADMINISTRATION OF FLORIDA 1801 HERMITAGE BLVD.,SUITE 100 TALLAHASSEE, FL 32308 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	: MAUREEN M. HAZEN		(01/24/2023
	Electronic Signature of Registered Agent			Date
Officer/Direc	ctor Detail :			
Title		T '01 -	-	
1100	DC	Title	D	
Name	DC DESANTIS, RON	Name	D MOODY, ASHLEY	
			-	
Name Address	DESANTIS, RON	Name	MOODY, ASHLEY	
Name Address	DESANTIS, RON PL05, THE CAPITOL	Name Address	MOODY, ASHLEY PL01 THE CAPTIOL	
Name Address City-State-Zip:	DESANTIS, RON PL05, THE CAPITOL TALLAHASSEE FL 32399-0001	Name Address City-State-Zip:	MOODY, ASHLEY PL01 THE CAPTIOL TALLAHASSEE FL 32399-1050	
Name Address City-State-Zip: Title	DESANTIS, RON PL05, THE CAPITOL TALLAHASSEE FL 32399-0001 TD	Name Address City-State-Zip: Title	MOODY, ASHLEY PL01 THE CAPTIOL TALLAHASSEE FL 32399-1050 D	OOR
Name Address City-State-Zip: Title Name Address	DESANTIS, RON PL05, THE CAPITOL TALLAHASSEE FL 32399-0001 TD PATRONIS, JIMMY	Name Address City-State-Zip: Title Name	MOODY, ASHLEY PL01 THE CAPTIOL TALLAHASSEE FL 32399-1050 D WATKINS, BEN	OOR
Name Address City-State-Zip: Title Name Address	DESANTIS, RON PL05, THE CAPITOL TALLAHASSEE FL 32399-0001 TD PATRONIS, JIMMY PL01, THE CAPTIOL	Name Address City-State-Zip: Title Name Address	MOODY, ASHLEY PL01 THE CAPTIOL TALLAHASSEE FL 32399-1050 D WATKINS, BEN 1801 HERMITAGE BLVD, 2ND FL	OOR
Name Address City-State-Zip: Title Name Address City-State-Zip:	DESANTIS, RON PL05, THE CAPITOL TALLAHASSEE FL 32399-0001 TD PATRONIS, JIMMY PL01, THE CAPTIOL TALLAHASSEE FL 32399	Name Address City-State-Zip: Title Name Address City-State-Zip:	MOODY, ASHLEY PL01 THE CAPTIOL TALLAHASSEE FL 32399-1050 D WATKINS, BEN 1801 HERMITAGE BLVD, 2ND FL TALLAHASSEE FL 32308	OOR
Name Address City-State-Zip: Title Name Address City-State-Zip: Title	DESANTIS, RON PL05, THE CAPITOL TALLAHASSEE FL 32399-0001 TD PATRONIS, JIMMY PL01, THE CAPTIOL TALLAHASSEE FL 32399 DP	Name Address City-State-Zip: Title Name Address City-State-Zip: Title	MOODY, ASHLEY PL01 THE CAPTIOL TALLAHASSEE FL 32399-1050 D WATKINS, BEN 1801 HERMITAGE BLVD, 2ND FL TALLAHASSEE FL 32308 SEC	OOR

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600003608

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: GINA WILSON

TREASURER

MEYER, JOEL

OF FL

City-State-Zip: TALLAHASSEE FL 32308

STATE BOARD OF ADMINISTRATION

1801 HERMITAGE BLVD. SUITE 100

Title

Name

Address

CHIEF OPERATING OFFICER 01/24/2023

FILED Jan 24, 2023

Electronic Signature of Signing Officer/Director Detail