I hereby certify that the information indicated on this report or supplemental report is true and accurat oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execut above, or on an attachment with all other like empowered.		
SIGNATURE: MARY CARAVELIS	ASST. TREASURER	02/14/2024

SIGNATURE: MARY CARAVELIS

Entity Name: THE FLORIDA SOCIETY OF GEOGRAPHERS, INC.

# **Current Principal Place of Business:**

5419 NE 22ND AVE FORT LAUDERDALE, FL 33308

# **Current Mailing Address:**

5419 NE 22ND AVE FORT LAUDERDALE, FL 33308

## FEI Number: 33-1184900

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

CARAVELIS, MARY 5419 NE 22 AVE FT. LAUDERDALE, FL 33308 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:

#### **Officer/Director Detail :** COO Title Title VS Name DIXON, BARNALI Name CARAVELIS, MARY UNIVERSITY OF SOUTH FLORIDA ST. Address 5419 NE 22 AVE Address PETERSBURG City-State-Zip: 140 7TH AVE. SOUTH -DAV 209 City-State-Zip: ST. PETERSBURG FL 33701

Electronic Signature of Signing Officer/Director Detail

FILED Feb 14, 2024 Secretary of State 6170228632CC

Certificate of Status Desired: No

FT. LAUDERDALE FL 33308

Date

Date