2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2025
Secretary of State
1190802733CC

DOCUMENT# N09000011013

Entity Name: SUNCOAST REGIONAL SOCIETY OF HEALTH-SYSTEM PHARMACISTS, INC.

Current Principal Place of Business:

2600 LAUREL ROAD E
PHARMACY
NORTH VENICE, FL 34275

Current Mailing Address:

2600 LAUREL ROAD E
PHARMACY
NORTH VENICE, FL 34275 US

FEI Number: 20-2819805

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEACHY, ASHLEIGH
2600 LAUREL ROAD E
PHARMACY
NORTH VENICE, FL 34275 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: ASHLEIGH BEACHY 02/25/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	SECRETARY
Name	VO, PETER
Address	2600 LAUREL ROAD E PHARMACY
City-State-Zip:	NORTH VENICE FL 34275

Title	TREASURER
Name	MCMAHON, BROOKE
Address	2600 LAUREL ROAD E PHARMACY
City-State-Zip:	NORTH VENICE FL 34275

Title	PAST PRESIDENT
Name	FAILE, MARTIN
Address	2600 LAUREL ROAD E PHARMACY
City-State-Zip:	NORTH VENICE FL 34275

Title	PRESIDENT
Name	BEACHY, ASHLEIGH
Address	2600 LAUREL ROAD E PHARMACY
City-State-Zip:	NORTH VENICE FL 34275

Title	PRESIDENT-ELECT
Name	GRINCHUK, ALEKSANDR
Address	2600 LAUREL ROAD E PHARMACY
City-State-Zip:	NORTH VENICE FL 34275

Title	CONTINUING EDUCATION COORDINATOR
Name	SAMALE, CHRISTINA
Address	2600 LAUREL ROAD E PHARMACY
City-State-Zip:	NORTH VENICE FL 34275

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: ASHLEIGH BEACHY PRESIDENT 02/25/2025

Electronic Signature of Signing Officer/Director Detail — Date