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.

TREASURER

SIGNATURE: TERI MATLACH

Electronic Signature of Signing Officer/Director Detail

Current Mailing Address:

P. O BOX 271774 TAMPA, FL 33688 US

FEI Number: 81-5287909

Name and Address of Current Registered Agent:

HELD, DENISE 4 SEA DRIFT TERRACE ORMOND BEACH, FL 32176 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	Р	Title	TREA
Name	CARRAZANA, LETICIA	Name	TERI, MATLACH
Address	P. O BOX 271774	Address	P. O BOX 271774
City-State-Zip:	TAMPA FL 33688	City-State-Zip:	TAMPA FL 33688

Certificate of Status Desired: No

01/13/2023 Date

FILED Jan 13, 2023 Secretary of State 7428493838CC

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1700000281

Entity Name: RUBY LEE MINAR SOROPTIMIST MEMORIAL FUND, INC.

Current Principal Place of Business:

P. O BOX 271774 TAMPA, FL 33688 493838CC

Date