

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000012663

**Entity Name:** THE SOCIAL EQUITY THROUGH EDUCATION ALLIANCE INC.

**Current Principal Place of Business:**

935 N. BENEVA SUITE 609 #103  
SARASOTA, FL 34232

**Current Mailing Address:**

935 N. BENEVA SUITE 609 #103  
SARASOTA, FL 34232

**FEI Number: 88-4374336**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DENNISON, ANNA  
3683 COUNTRY PLACE BOULEVARD  
SARASOTA, FL 34233 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DIRECTOR AND SECRETARY  
Name           ROSENSWEET, MALI JAANA  
Address        123 BEAR CREEK LANE, APARTMENT  
                  4  
City-State-Zip: ASHEVILLE NC 28806

Title           DIRECTOR/BOARD CHAIR  
Name           STALLBAUMER, ISABELLE  
Address        77953 ROAD 434  
City-State-Zip: OCONTO NE 68860

Title           DIRECTOR AND TREASURER  
Name           SLAYTON, OLIVER  
Address        4 AUBURN ST.  
City-State-Zip: BROOKLINE MA 02446

Title           PRESIDENT  
Name           MORICZ, ZANDER  
Address        337 PASSAGE WAY  
City-State-Zip: OSPREY FL 34229

*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: ZANDER MORICZ**

**PRESIDENT**

**04/17/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date