

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005561

Entity Name: SUNCOAST CHAPTER OF THE NATIONAL ACADEMY OF
TELEVISION ARTS AND SCIENCES, INC.**FILED**
Mar 18, 2020
Secretary of State
7255413001CC**Current Principal Place of Business:**10400 N.W.18TH PL
PEMBROKE PINES, FL 33026**Current Mailing Address:**10400 NW 18TH PLACE
PEMBROKE PINES, FL 33026 US**FEI Number: 65-0920090****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RICE, ARTHUR HALSEY ESQ.
101 NE THIRD AVENUE
SUITE 1800
FORT LAUDERDALE, FL 33301 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	PRESIDENT
Name	MAYS, JOHN
Address	1393 SW 179 TERRACE
City-State-Zip:	DEERFIELD BEACH FL 33029

Title	T
Name	BEHRENS, ELIZABETH
Address	2420 DEER CREEK CC BLVD., #309-D
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	VD
Name	ALFONZO, BARBARA
Address	15000 SW 27TH ST.
City-State-Zip:	MIRAMAR, FL 33027

Title	S
Name	MACDONALD, KARLA
Address	10400 NW 18TH PLACE
City-State-Zip:	PEMBROKE PINES FL 33026

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: ELIZABETH BEHRENS**TREASURER****03/18/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date