

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22000008960

Entity Name: ROSIE'S ADVENTURES, INC.**Current Principal Place of Business:**3141 TWISTED OAK LOOP
KISSIMMEE, FL 34744**Current Mailing Address:**3141 TWISTED OAK LOOP
KISSIMMEE, FL 34744 US**FEI Number: 88-3586573****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAMIREZ, NICOLE
3141 TWISTED OAK LOOP
KISSIMMEE, FL 34744 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	DIR
Name	RAMIREZ, NICOLE
Address	3141 TWISTED OAK LOOP
City-State-Zip:	KISSIMMEE FL 34744

Title	DIR
Name	KEMPER, SARAH
Address	15205 SW 78TH PLACE
City-State-Zip:	PALMETTO BAY FL 33157

Title	DIR
Name	SINKIEWICZ, LISA
Address	2712 LANTERN LANE
City-State-Zip:	AUDUBON PA 19403

Title	P
Name	RAMIREZ, NICOLE
Address	3141 TWISTED OAK LOOP
City-State-Zip:	KISSIMMEE FL 34744

Title	VP
Name	VERSHEL, SUSAN
Address	9830 LOBLOLLY WOODS DR
City-State-Zip:	ORLANDO FL 32832

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: NICOLE RAMIREZ**FOUNDER/EXECUTIVE
DIRECTOR****03/16/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date