

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED**  
**Apr 06, 2011**  
**Secretary of State**

DOCUMENT# N07000012210

**Entity Name:** SOUTHWEST FLORIDA DISC GOLF ASSOCIATION INC.

**Current Principal Place of Business:**

26873 MORTON GROVE DR  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

**Current Mailing Address:**

26873 MORTON GROVE DR  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

**FEI Number:** 74-3102287      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

STERBA, LARRY  
26873 MORTON GROVE DR  
BONITA SPRINGS, FL 34135      US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: AMADOR, JESSE  
Address: 350 SE 33RD TERRACE  
City-St-Zip: CAPE CORAL, FL 33904

Title: SEC  
Name: AMADOR, JENNIFER  
Address: 350 SE 33RD TERRACE  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP,S  
Name: REXFORD, JEREMY  
Address: 27791 HACIENDA BLVD # 222C  
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP,N  
Name: MACNIEIL, JOSH  
Address: 1419 SE 11 ST  
City-St-Zip: CAPE CORAL, FL 33990 US

Title: TRES  
Name: LARRY, STERBA  
Address: 26873 MORTON GROVE DR  
City-St-Zip: BONITA SPRINGS, FL 34135

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: LARRY STERBA

TRES

04/06/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date