

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711023

Entity Name: ILLINI ASSOCIATION, INC.**Current Principal Place of Business:**545 SOUTH FORT LAUDERDALE BEACH BLVD
FORT LAUDERDALE, FL 33316**Current Mailing Address:**C/O PHOENIX MANAGEMENT SERVICES, INC.
4800 N STATE ROAD 7 SUITE 105
LAUDERDALE LAKES, FL 33319 US**FEI Number:** 59-0973921**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
625 NORTH FLAGLER DRIVE, 7TH FLOOR
WEST PALM BEACH, FL 33401 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
Name	RICKER, GEORGE
Address	545 SOUTH FT. LAUD. BEACH BLVD
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	SECRETARY
Name	RUSSELL, RICK
Address	545 S. FORT LAUD BEACH BLVD
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	PRESIDENT
Name	BENNETT, JOHN
Address	545 S FT LAUDERDALE BLVD
City-State-Zip:	FT, LAUDERDALE FL 33316

Title	VP
Name	MATUSZEWSKI, JAMES
Address	545 SOUTH FT LAUDERDALE BEACH BLVD.
City-State-Zip:	FT LAUDERDALE FL 33316

Title	TREASURER
Name	MESQUITA, MARIO
Address	545 SOUTH FORT LAUDERDALE BEACH BLVD
City-State-Zip:	FORT LAUDERDALE FL 33316

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: JOHN BENNETT**PRESIDENT****04/02/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date