

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 720507

**Entity Name:** TATE QUARTERBACK CLUB, INC.

**Current Principal Place of Business:**

1771 TATE ROAD  
CANTONMENT, FL 32533

**Current Mailing Address:**

P.O. BOX 303  
GONZALEZ, FL 32560 US

**FEI Number:** 59-3084381

**Certificate of Status Desired:** No

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

MELTON, ELLEN  
1771 TATE ROAD  
CANTONMENT, FL 32533 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:** ELLEN MELTON

04/18/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name BETHEA, CHRIS  
Address P.O. BOX 303  
City-State-Zip: GONZALEZ FL 32560

Title VP  
Name KELLEY, BEAU  
Address P.O. BOX 303  
City-State-Zip: GONZALEZ FL 32560

Title T  
Name PALMER, ANNA  
Address P.O. BOX 303  
City-State-Zip: GONZALEZ FL 32560

Title S  
Name MELTON, ELLEN  
Address P.O. BOX 303  
City-State-Zip: GONZALEZ FL 32560

Title D  
Name LINDSEY, JAY  
Address P.O. BOX 303  
City-State-Zip: GONZALEZ FL 32560

Title D  
Name EDGAR, TIM  
Address P.O. BOX 303  
City-State-Zip: GONZALEZ FL 32560

Title D  
Name RIGGAN, ALYSSA  
Address P.O. BOX 303  
City-State-Zip: GONZALEZ FL 32560

*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:** ELLEN MELTON

**SECRETARY**

04/18/2017

Electronic Signature of Signing Officer/Director Detail

Date