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.

TREASURER

SIGNATURE: KERRIE L LYKE

Current Principal Place of Business: 2700 N OLEANDER AVE

Entity Name: SEABREEZE FOOTBALL BOOSTERS, INC.

DAYTONA BEACH, FL 32118

## **Current Mailing Address:**

2700 N OLEANDER AVE DAYTONA BEACH, FL 32118

### FEI Number: 59-3268757

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

Electronic Signature of Registered Agent

BECK, DAVID BESQ 404 N HALIFAX AVE DAYTONA BEACH, FL 32118 US

# Certificate of Status Desired: Yes

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:

**Officer/Director Detail :** Title Ρ Title т BUNCH, JON Name LYKE, KERRIE Name **102 SANDCASTLE DRIVE** Address **4 OAKMONT CIRCLE** Address City-State-Zip: ORMOND BEACH FL 32174 ORMOND BEACH FL 32176 City-State-Zip: Title SECRETARY Title VP Name KELLEY, LISA Name GLENN, NIKIA 16000 CAROLINES COVE Address 856 QUAIL RUN Address APT. # 203A ORMOND BEACH FL 32174 City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip:

Electronic Signature of Signing Officer/Director Detail

FILED Jan 27, 2021 Secretary of State

# 6675229576CC

Date

01/27/2021

Date