Entity Name: TABLE SHUFFLEBOARD ASSOCIATION, INC.

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

10068 COUNTRY VIEW LN FORNEY, TX 75126

Current Mailing Address:

DOCUMENT# N0100003078

10068 COUNTRY VIEW LN FORNEY, TX 75126 US

FEI Number: 68-0346464

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 CORAL WAY 4TH FLOOR MIAMI, FL 33145 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Officer/Director Detail :					
Title	DIRECTOR	Title	DIRECTOR		
Name	FRENCH, LYNDA P	Name	SEXTON, DEBBIE		
Address	8155 MEADOW LARK DRIVE	Address	11765 WEST AVE # 345		
City-State-Zip:	WYNNEWOOD OK 73098	City-State-Zip:	SAN ANTONIO TX 78216-2559		
Title	DIRECTOR	Title	DIRECTOR		
Name	CREAKBAUM, LARRY	Name	GRAY, MARK		
Address	5105 BALTUSTROL DRIVE	Address	8505 E. 114TH STREET		
City-State-Zip:	AVON IN 46123	City-State-Zip:	KANSAS CITY MO 21122		
Title	DIRECTOR	Title	DIRECTOR		
Name	HUNT, BOB	Name	PAYNE, JIM		
Address	380 CEDAR RIVER WAY	Address	721 RB RD		
City-State-Zip:	SACRAMENTO CA 95831	City-State-Zip:	STOCKTON MO 65785		
Title	DIRECTOR	Title	DIRECTOR		
Name	SALAZAR, AL	Name	GRONAU, ROSS		
Address	9227 W. KATHLEEN RD	Address	2304 BEL AIR RD		
City-State-Zip:	PEORIA AZ 85382	City-State-Zip:	NORFOLK NE 68701		

Continues on page 2

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.

01/17/2018 SIGNATURE: GARY E NELSON PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 17, 2018 Secretary of State CC6898331684

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	MARTIN, JAMES G	Name	PACHIK, BRIAN
Address	36832 HIDDEN TRAIL CT	Address	290 MERVINE ST
City-State-Zip:	WINCHESTER CA 92596	City-State-Zip:	POTTSTOWN PA 19464
Title	DIRECTOR	Title	DIRECTOR
Name	WALKER, STEVE	Name	WILLIAMS, LOUISE
Address	843 E 4TH ST	Address	189 BARRY AVENUE
City-State-Zip:	CUSHING OK 74023	City-State-Zip:	LANDSDALE PA
Title	PRESIDENT, DIRECTOR	Title	VP, DIRECTOR
Name	NELSON, GARY E	Name	O'BRIEN, JAMES M
Address	10068 COUNTRY VIEW LN	Address	2811 E 25TH ST
City-State-Zip:	FORNEY TX 75126	City-State-Zip:	VANCOUVER WA 98661
Title	TREASURER, DIRECTOR	Title	DIRECTOR
Name	BOLLA, MEGAN	Name	MAKO, FRANK
Address	2304 BEL AIR RD.	Address	1590 N. NATIONAL AVE #210
City-State-Zip:	NORFOLK NE 68701	City-State-Zip:	CHEHALIS WA 98532
Title	SECRETARY	Title	DIRECTOR
Name	ABLES, CASEY	Name	MILLER, FRED
Address	10811 SAGEWIND	Address	114 FREE UNION RD.
City-State-Zip:	HOUSTON TX 77089	City-State-Zip:	BELVIDERE NJ 07823