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.

MS

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Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent

Officer/Director Detail :				
Title	PRESIDENT	Title	SD	
Name	MALO, AARON	Name	STRAWSER, ANN	
Address	12710 BALM RIVERVIEW RD	Address	7303 W RIVERCHASE 2703	
City-State-Zip:	RIVERVIEW FL 33569	City-State-Zip:	TEMPLE TERRACE FL 33637	
Title	TD	Title Name	VP	
Name	LAY, CONNIE I		KINNISON, JEWEL	
Address	27547 MILLER RD	Address	1609 MOSAIC FOREST DR	
City-State-Zip:	DADE CITY FL 33525	City-State-Zip:	SEFFNER FL 33584	
Title	OTHER, VP OF SERVICE	Title Name	PARLIMENTARIAN	
Name	FRANK, JANE		PRESTON, STEVE	
Address	11934 TIMBERHILL DRIVE	Address	11305 PELICAN LAKE CT	
City-State-Zip:	RIVERVIEW FL 33569	City-State-Zip:	RIVERVIEW FL 33569	

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: CONNIE LAY

FEI Number: 76-0704335

DOCUMENT# N0200005204

Current Principal Place of Business:

9304 RIVER COVE DR RIVERVIEW, FL 33569

9304 RIVER COVE DR RIVERVIEW, FL 33569

Current Mailing Address:

Name and Address of Current Registered Agent:

LAY, CONNIE I 27547 MILLER RD DADE CITY, FL 33525 US

Entity Name: KREWE OF THE SOUTH SHORE MARAUDERS, INC.

FILED Jan 09, 2015 Secretary of State CC3327892856

01/09/2015 Date

Certificate of Status Desired: No

01/09/2015