

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

DOCUMENT# N04000001391

**Entity Name:** MANASOTA LACROSSE ACADEMY, INC.**Current Principal Place of Business:**11523 PALMBRUSH TRAIL, SUITE 119  
BRADENTON, FL 34202**Current Mailing Address:**11523 PALMBRUSH TRAIL, SUITE 119  
BRADENTON, FL 34202 US**FEI Number:** 37-1560912**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CROSS STREET CORPORATE SERVICES, LLC  
200 S. ORANGE AVENUE  
SARASOTA, FL 34236 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:** PATRICK W. RYSKAMP

01/12/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            RICE, DAN  
Address        11523 PALMBRUSH TRAIL, SUITE 119  
City-State-Zip: BRADENTON FL 34202

Title            VP, DIRECTOR  
Name            MORALES, JASON  
Address        11523 PALMBRUSH TRAIL, SUITE 119  
City-State-Zip: BRADENTON FL 34202

Title            TREASURER, DIRECTOR  
Name            RYSKAMP, PATRICK W  
Address        11523 PALMBRUSH TRAIL, SUITE 119  
City-State-Zip: BRADENTON FL 34202

Title            SECRETARY, DIRECTOR  
Name            INGHAM, SCOTT  
Address        11523 PALMBRUSH TRAIL, SUITE 119  
City-State-Zip: BRADENTON FL 34202

Title            DIRECTOR  
Name            MARKOWSKI, CHRISTOPHER  
Address        11523 PALMBRUSH TRAIL, SUITE 119  
City-State-Zip: BRADENTON FL 34202

Title            DIRECTOR  
Name            SFORZO, CHRISTOPHER  
Address        11523 PALMBRUSH TRAIL, SUITE 119  
City-State-Zip: BRADENTON FL 34202

*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:** PATRICK W. RYSKAMP**DIRECTOR**

01/12/2017

Electronic Signature of Signing Officer/Director Detail

Date