

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002874

Entity Name: YE ENCHANTED KREWE OF BRIGADOON, INC.**Current Principal Place of Business:**5813 S MACDILL AVE.
TAMPA, FL 33611**Current Mailing Address:**PO BOX 18091
TAMPA, FL 33679 US**FEI Number:** 20-1353980**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HERBST, JOHN M
641 FIRST STREET SOUTH
ST. PETERSBURG, FL 33701 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name AREVALO, GARTH
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679

Title SECRETARY
Name HAWKINS, TRACY
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679

Title CHIEFTAN 5
Name GWIAZDOWSKI, JAMIE
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679

Title CHIEFTAN 1
Name TRICK, SHERRIE
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679

Title TREASURER
Name HANLON, LINDA
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679

Title CHIEFTAN 4
Name ACOSTA, PAUL ALBERT
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679

Title CHIEFTAN 3
Name MOOK, JENNIFER
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679

Title CHIEFTAN 2
Name FRANCIS, DANIEL
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679

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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: LINDA HANLON**TREASURER****03/21/2017**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHIEFTAN 6
Name TEAL, SCOTT
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679

Title CHIEFTAN 7
Name AKINS, KEN
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679

Title CHIEFTAN 8
Name MITCHELL, MIKE
Address PO BOX 18091
City-State-Zip: TAMPA FL 33679