2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003546

Entity Name: EAST PASCO USBC ASSOCIATION INC.

Current Principal Place of Business:

36636 SPANISH ROSE DR DADE CITY, FL 33525

Current Mailing Address:

36636 SPANISH ROSE DR DADE CITY, FL 33525 US

FEI Number: 20-3540814 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRINCIPATO, NANCY 36636 SPANISH ROSE DR DADE CITY, FL 33525 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: NANCY PRINCIPATO 02/23/2024

Electronic Signature of Registered Agent

Date

FILED Feb 23, 2024

Secretary of State

3783152239CC

Officer/Director Detail:

Title **PRES** Title ASSN. MGR. & DIRECTOR PRINCIPATO, NANCY Name O'STEEN, WILLIAM Name 36636 SPANISH ROSE DR Address 19115 ADIRONDACK TERRACE Address City-State-Zip: DADE CITY FL 33525 DADE CITY FL 33523 City-State-Zip:

Title SGT. AT ARMS Title VΡ Name TUCKER, PATRICIA MENETRE, TRACY Name Address 39221 RIVER ROAD Address 6025 EVANSBROOK DR DADE CITY FL 33525 City-State-Zip: City-State-Zip: ZEPHYRHILLS FL 33541

Title DIRECTOR Title DIRECTOR

NameJONES, TERESANameTUCKER, MORIAHAddress6627 BRADFORD WOODS DRAddress39221 RIVER ROADCity-State-Zip:ZEPHYRHILLS FL 33542City-State-Zip:DADE CITY FL 33525

Title DIRECTOR Title DIRECTOR

NamePARKER, JAMES PAULNameSTALSONBURG, JAYMEAddress4132 COURT ST.Address38027 - 10TH AVENUECity-State-Zip:ZEPHYRHILLS FL 33542City-State-Zip:ZEPHYRRILLS FL 33542

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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: NANCY PRINCIPATO ASSOCIATION MANAGER 02/23/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name DENMARK, ALISSA

Address 4410 BERRA DR

City-State-Zip: WESLEY CHAPEL FL 33545

Title DIRECTOR
Name KNOPP, ERIC

Address 9500 SILVER BEND DRIVE

City-State-Zip: DADE CITY FL 33525

Title DIRECTOR
Name HIGGINS, AMY

Address 39200 6TH AVENUE

City-State-Zip: ZEPHYRHILLS FL 33542

Title DIRECTOR

Name SWAILES, SUZIE Address 3235 SANDY DR

City-State-Zip: ZEPHYRHILLS FL 33541

Title DIRECTOR

Name MCGOWIN, ELIZABETH
Address 30806 MIDDLE LAKE DR
City-State-Zip: DADE CITY FL 33523

Title DIRECTOR

Name AUTON, KATHERYN

Address P.O. BOX 1385

City-State-Zip: DADE CITY FL 33526

Title DIRECTOR

Name STANEK, GENE

Address 39118 WOODLAND DR
City-State-Zip: ZEPHYRHILLS FL 33542

Title DIRECTOR

Name ROTHERS, KAREN

Address 4813 ROYAL BIRKDALE WAY
City-State-Zip: WESLEY CHAPEL FL 33543

Title DIRECTOR

Name BARTHLE, MARTHA

Address 18233 MOUNT OLIVE DR City-State-Zip: DADE CITY FL 33523