

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009391

FILED
Apr 16, 2014
Secretary of State
CC6661773496

Entity Name: BREVARD - INDIAN RIVER USBC YOUTH ASSOCIATION, INC.

Current Principal Place of Business:

6349 HUDSON ROAD
COCOA, FL 32927

Current Mailing Address:

6349 HUDSON ROAD
COCOA, FL 32927

FEI Number: 20-5633664

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STOUT, MARK
6349 HUDSON ROAD
COCOA, FL 32927 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 CIANFROCCO, ANGELO
Address 6775 CALUSA
City-State-Zip: COCOA FL 32927

Title VP
Name STEPKE, JOHN
Address 2586 BURNS AVENUE
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR
Name STOUT, MARK
Address 6349 HUDSON ROAD
City-State-Zip: COCOA FL 32927

Title DIRECTOR
Name FREI, MICHAEL
Address 3361 MEADOW RIDGE DR
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name SLEEMAN, DENISE
Address 2906 1ST LANE
City-State-Zip: VERO BEACH FL 32968

Title DIRECTOR
Name WHEELER, RANDY
Address 4385 KUMQUAT ST
City-State-Zip: COCOA FL 32926

Title DIRECTOR
Name CIANFROCCO, MARY
Address 6775 CALUSA AVE
City-State-Zip: COCOA FL 32927

Title DIRECTOR
Name WATKINSON, PATRICK
Address 415 E PINE ST
 #717
City-State-Zip: ORLANDO FL 32801

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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: MARK STOUT

DIRECTOR

04/16/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SCOTT, BETH
Address 1875 BRYN MAWR DR
City-State-Zip: TITUSVILLE FL 32796

Title DIRECTOR
Name SLEEMAN, GERALD
Address 2906 1ST LANE
City-State-Zip: VERO BEACH FL 32968