2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2016
Secretary of State
CC5792082314

DOCUMENT# N10000001981

Entity Name: FLORIDA HIGH SCHOOL HOCKEY ASSOCIATION, INC.

Current Principal Place of Business:

16704 TOBACCO RD
LUTZ, FL 33558

Current Mailing Address:

16704 TOBACCO RD.
LUTZ, FL 33558 US

FEI Number: 27-2744221

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUARD, THOMAS W
16704 TOBACCO RD.
LUTZ, FL 33558 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	OFFICER, DIRECTOR
Name	BUBLEY, DAN
Address	3820 NORTHDALE BLVD., SUITE 312
City-State-Zip:	TAMPA FL 33624

Title	DIRECTOR
Name	RIEGLER, LINDA
Address	914 CENTERBROOK DR.
City-State-Zip:	BRANDON FL 33511

Title	VP, DIRECTOR
Name	MAHLOCK, BRUCE
Address	3866 ALLENWOOD ST
City-State-Zip:	SARASOTA FL 34232

Title	VP, DIRECTOR
Name	GRIECO, STEVEN
Address	18144 REGENTS SQUARE DRIVE
City-State-Zip:	TAMPA FL 33647

Title	VP, DIRECTOR
Name	GUARD, THOMAS W
Address	3103 W. FAIR OAKS AVE.
City-State-Zip:	TAMPA FL 33611

Title	T D
Name	CARL, FRASSE
Address	16621 ASHTON GREEN DR
City-State-Zip:	LUTZ FL 33558

Title	PRESIDENT
Name	DE LA PAZ, ED DR.
Address	1017 MISTY HOLLOW LN.
City-State-Zip:	TARPON SPRINGS FL 34688

Title	DIRECTOR
Name	BRADLEY, BRIAN
Address	401 CHANNELSIDE DRIVE
City-State-Zip:	TAMPA FL 33602

Continues on page 2

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: CARL FRASSE TREASURER 02/11/2016

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SUTHERLAND, JULIE
Address	1011 SONATA LN.
City-State-Zip:	APOLLO BEACH FL 33572