

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000000334

**FILED
Jun 17, 2015
Secretary of State
CC7951735382**

Entity Name: TEAM PORT CHARLOTTE, INC.

Current Principal Place of Business:

C/O CULTURAL CENTER
2280 AARON ST. ATTN: STEPHEN CARTER
PORT CHARLOTTE, FL 33952

Current Mailing Address:

P.O. BOX 496093
PORT CHARLOTTE, FL 33949-6093 US

FEI Number: 27-4668313

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAMPBELL'S ENROLLED AGENTS & CO. INC.
405 TAMIAMI TRAIL
PUNTA GORDA, FL 33950 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: J. DAVID CAMPBELL, PRESIDENT

06/17/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CARTER, STEPHEN
Address C/O CULTURAL CENTER
 2280 AARON ST. ATTN: STEPHEN
 CARTER
City-State-Zip: PORT CHARLOTTE FL 33952

Title D
Name CANJA, TESS
Address 1166 WINSTON ST
City-State-Zip: PORT CHARLOTTE FL 33952

Title SECRETARY
Name MATHIS, JULIE
Address 2702 TAMIAMI TRAIL
City-State-Zip: PORT CHARLOTTE FL 33952

Title TREASURER
Name BENJAMIN, JACQUELINE
Address 3002 TAMIAMI TRAIL
City-State-Zip: PORT CHARLOTTE FL 33952

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: JACQUELINE BENJAMIN

TREASURER

06/17/2015

Electronic Signature of Signing Officer/Director Detail

Date