## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000006347

Entity Name: PORT ORANGE FLAMES YOUTH BASKETBALL ASSOCIATION,

INC.

Apr 29, 2014 **Secretary of State** CC5065248829

**FILED** 

## **Current Principal Place of Business:**

981 SMOKERISE BLVD. PORT ORANGE, FL 32127

# **Current Mailing Address:**

981 SMOKERISE BLVD. PORT ORANGE, FL 32127

FEI Number: 45-2696759 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PATRICK, JERRY LII 981 SMOKERISE BLVD. PORT ORANGE, FL 32127 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 Title VΡ

Name PATRICK, JERRY LII Name EBERHEART, FRANKLIN

Address 981 SMOKERISE BLVD. Address 3620 NANTUCK ISLAND DR, #202

City-State-Zip: PORT ORANGE FL 32127 City-State-Zip: PORT ORANGE FL 32129

Title **TRESURER** 

Name PATRICK, SHARON Address 981 SMOKERISE BLVD. PORT ORANGE FL 32127 City-State-Zip:

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: JERRY L PATRICK II Electronic Signature of Signing Officer/Director Detail **PRESIDENT** 

04/29/2014