

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000007856

**Entity Name:** THE S-CLUB ALUMNI LETTERWINNERS ASSOCIATION, INC.**FILED**  
**Apr 20, 2015**  
**Secretary of State**  
**CC2800951198****Current Principal Place of Business:**C/O CHARLES N. CLELAND, JR.  
2127 RINGLING BLVD. SUITE 104  
SARASOTA, FL 34237**Current Mailing Address:**P.O. BOX 50621  
SARASOTA, FL 34232 US**FEI Number: APPLIED FOR****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SABA, RICHARD D ESQ.  
2033 MAIN STREET  
SUITE 400  
SARASOTA, FL 34237 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:** RICHARD D. SABA**04/20/2015**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VP
Name	CALLEJA, KENNETH C
Address	8319 EAGLE CROSSING
City-State-Zip:	SARASOTA FL 34241

Title	VP
Name	SMITH, JOHN E
Address	1181 SEACREST DR NW
City-State-Zip:	PORT CHARLOTTE FL 33948

Title	PRESIDENT
Name	CLELAND, CHARLES N JR.
Address	7184 WESTWOOD WAY
City-State-Zip:	SARASOTA FL 34241

Title	SECRETARY
Name	SHUMWAY, JANE SUE
Address	2506 S. MILMAR DRIVE
City-State-Zip:	SARASOTA FL 34237

Title	TREASURER
Name	CLARKSON, THOMAS H
Address	1328 STOEBER AVENUE
City-State-Zip:	SARASOTA FL 34232

*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:** CHARLES N. CLELAND, JR.**PRESIDENT****04/20/2015**

Electronic Signature of Signing Officer/Director Detail

Date