

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

DOCUMENT# N11000007856

**FILED**  
**Apr 20, 2015**  
**Secretary of State**  
**CC2800951198**

**Entity Name:** THE S-CLUB ALUMNI LETTERWINNERS ASSOCIATION, INC.

**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