

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000001366

Entity Name: PORT SAINT LUCIE FOOTBALL AND CHEER ASSOCIATION, INC.**FILED**
Jun 27, 2018
Secretary of State
CC9503848873**Current Principal Place of Business:**220 S.E. IRVING ST.
PORT ST. LUCIE, FL 34983**Current Mailing Address:**P.O. BOX 13766
FORT PIERCE,, FL 34979 US**FEI Number: 46-2026621****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HALL, BARBARA A
546 NW MARION AVENUE
PORT ST. LUCIE, FL 34983 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:** BARBARA A HALL**06/27/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	ALICEA, ALBERT
Address	P.O. BOX 13766
City-State-Zip:	FORT PIERCE FL 34982

Title	VP
Name	HORNE, CHRISTINA
Address	P.O. BOX 13766
City-State-Zip:	FORT PIERCE, FL 34979

Title	TREA
Name	HALL, BARBARA A
Address	546 NW MARION AVENUE
City-State-Zip:	PORT ST LUCIE FL 34983

Title	SECRETARY
Name	LAPORTE, CHANTEL
Address	P.O. BOX 13766
City-State-Zip:	FORT PIERCE, FL 34979

Title	VP
Name	JONES, CAROL
Address	P.O. BOX 13766
City-State-Zip:	FORT PIERCE, FL 34979

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: BARBARA A HALL**TREASURER****06/27/2018**

Electronic Signature of Signing Officer/Director Detail

Date