2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2017
Secretary of State
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Entity Name: PORT SAINT LUCIE FOOTBALL AND CHEER ASSOCIATION, INC.

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 05/01/2017

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	SCAVUZZO, CHARLIE
Address	5748 N.W. BELWOOD CIRCLE
City-State-Zip:	PORT ST LUCIE FL 34986

Title	VP
Name	RIVIERA, KELLY
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	CRUZ DAMES, LETICIA
Address	P.O. BOX 13766
City-State-Zip:	FORT PIERCE, FL 34979

Title	VP
Name	OCKERMAN, SABRINA
Address	802 SW IVANHOE DRIVE
City-State-Zip:	PORT ST. LUCIE FL 34983

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 05/01/2017

Electronic Signature of Signing Officer/Director Detail — Date