

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000004910

**Entity Name:** SIDE OUT CLUB, INC.**Current Principal Place of Business:**310 5TH AVE  
INDIALANTIC, FL 32903**Current Mailing Address:**310 5TH AVE  
INDIALANTIC, FL 32903**FEI Number:** 47-0980418**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PANOUSES, KURT D ESQ.  
310 5TH AVE  
INDIALANTIC, FL 32903 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:** KURT D PANOUSES ESQ

02/17/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                         |                 |                      |
|-----------------|-------------------------|-----------------|----------------------|
| Title           | DIRECTOR                | Title           | DIRECTOR, PRESIDENT  |
| Name            | SLATE, CHRISTINA        | Name            | SILVESTRI, NICOLE    |
| Address         | 621 FRANKLYN AVE.       | Address         | 138 BROWNING AVE NE  |
| City-State-Zip: | INDIALANTIC FL 32903    | City-State-Zip: | PALM BAY FL 32907    |
|                 |                         |                 |                      |
| Title           | DIRECTOR, VP, SECRETARY | Title           | DIRECTOR, TREASURER  |
| Name            | FRIDAY, CARRIE          | Name            | SULLIVAN, CARRIE     |
| Address         | 724 MUSGRASS CIRCLE     | Address         | 121 ORMOND DR        |
| City-State-Zip: | WEST MELBOURNE FL 32904 | City-State-Zip: | INDIALANTIC FL 32903 |

*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:** NICOLE SILVESTRI

PRESIDENT

02/17/2023

Electronic Signature of Signing Officer/Director Detail

Date