

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000005738

Entity Name: ORLANDO CURLING CLUB CORP.**Current Principal Place of Business:**36 E ROSEVEAR ST
ORLANDO, FL 32804**Current Mailing Address:**36 E ROSEVEAR ST
ORLANDO, FL 32804**FEI Number:** 46-5587551**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PITTARD, J. BRYAN
36 E ROSEVEAR ST
ORLANDO, FL 32804 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT/DIRECTOR
Name	PITTARD, J. BRYAN
Address	36 E ROSEVEAR ST
City-State-Zip:	ORLANDO FL 32804
Title	SECRETARY/DIRECTOR
Name	MAEDER, ERIK
Address	3112 POPPYSEED CT
City-State-Zip:	ORLANDO FL 32826
Title	TREASURER/DIRECTOR
Name	AROSE, EDWARD
Address	5690 JOHN ANDERSON HWY
City-State-Zip:	FLAGLER BEACH FL 32136
Title	DIRECTOR
Name	CLULOW, KENN
Address	9273 SE ALDER ST
City-State-Zip:	PORTLAND OR 97216

Title	DIRECTOR
Name	CAIN, JAMES D
Address	545 S KELLER RD APT 2113
City-State-Zip:	ORLANDO FL 32810
Title	VICE PRESIDENT/DIRECTOR
Name	ANDERSON, JEFF
Address	6512 COTTAGE LANE
City-State-Zip:	ST CLOUD FL 34771
Title	DIRECTOR
Name	CUOCO, JORDAN
Address	12449 SOPHIAMARIE LOOP
City-State-Zip:	ORLANDO FL 32828
Title	DIRECTOR
Name	JOSEPH, ROBERTS
Address	1168 COASTAL CIR
City-State-Zip:	OCOE FL 34761

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: EDWARD AROSE**TREASURER****01/22/2018**

Electronic Signature of Signing Officer/Director Detail

Date