

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

DOCUMENT# N14000008240

**FILED  
Jan 13, 2015  
Secretary of State  
CC4191204737**

**Entity Name:** SAINT PETERSBURG HURRICANES CORP

**Current Principal Place of Business:**

930 MYAKKA CT NE  
SAINT PETERSBURG, FL 33702

**Current Mailing Address:**

930 MYAKKA CT NE  
SAINT PETERSBURG, FL 33702 US

**FEI Number:** 47-1771271

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

UBER, CHAD F  
930 MYAKKA CT NE  
SAINT PETERSBURG, FL 33702 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 P  
Name UBER, CHAD F  
Address 930 MYAKKA CT NE  
City-State-Zip: SAINT PETERSBURG FL 33702

Title P  
Name GALLOWAY, BRIAN  
Address 3640 FOSTER HILL DR. N  
City-State-Zip: SAINT PETERSBURG FL 33703

Title VP  
Name MADDIX, MATTHEW  
Address 500 TRINITY LANE  
City-State-Zip: SAINT PETERSBURG FL 33716

*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:** CHAD UBER

**PRESIDENT**

**01/13/2015**

Electronic Signature of Signing Officer/Director Detail

Date