

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000010591

**Entity Name:** SWFL YOUTH BASKETBALL CORPORATION

**Current Principal Place of Business:**

1965 SAGEBRUSH CIR  
NAPLES, FL 34120

**Current Mailing Address:**

1965 SAGEBRUSH CIR  
NAPLES, FL 34120 US

**FEI Number:** 47-5566350

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS INC  
13302 WINDING OAKS BLVD STE A  
TAMPA, FL 33612 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           | PD                       | Title           | SD                       |
| Name            | FLOTHE, JAMES            | Name            | VOTTA, ANTHONY           |
| Address         | 4180 60TH AVE NE         | Address         | 2370 NAPLES TRACE CIR #7 |
| City-State-Zip: | NAPLES FL 34120          | City-State-Zip: | NAPLES FL 34109          |
|                 |                          |                 |                          |
| Title           | TD                       |                 |                          |
| Name            | WELKENBACH, SCOTT K      |                 |                          |
| Address         | 2370 NAPLES TRACE CIR #7 |                 |                          |
| City-State-Zip: | NAPLES FL 34109          |                 |                          |

*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:** JAMES M FLOTHE

**PRESIDENT**

**03/25/2018**

Electronic Signature of Signing Officer/Director Detail

Date