

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

**FILED**

**Jan 24, 2018**

**Secretary of State**

**CC1982716273**

DOCUMENT# N16000011724

**Entity Name:** 1 TACKLE 4 CHANGE INC.

**Current Principal Place of Business:**

61 CAROLINA CT  
CRAWFORDVILLE, FL 32327

**Current Mailing Address:**

61 CAROLINA CT  
CRAWFORDVILLE, FL 32327 US

**FEI Number:** 81-4647325

**Certificate of Status Desired:** No

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

BRADHAM, NIGEL  
61 CAROLINA CT  
CRAWFORDVILLE, FL 32327 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  
Name            BRADHAM, NIGEL  
Address        61 CAROLINA CT  
City-State-Zip: CRAWFORDVILLE FL 32327

Title            VP  
Name            DAVIS, NIA  
Address        61 CAROLINA CT  
City-State-Zip: CRAWFORDVILLE FL 32327

Title            DIRECTOR  
Name            RUCKER, ROSE  
Address        61 CAROLINA CT  
City-State-Zip: CRAWFORDVILLE FL 32327

Title            DOP  
Name            ROBINSON, TAJA  
Address        61 CAROLINA CT  
City-State-Zip: CRAWFORDVILLE FL 32327

Title            STRATEGY DIRECTOR  
Name            GILLEY, ZANDRA  
Address        61 CAROLINA CT  
City-State-Zip: CRAWFORDVILLE FL 32327

Title            SECRETARY  
Name            THOMAS-HAYWARD, NINA  
Address        61 CAROLINA CT  
City-State-Zip: CRAWFORDVILLE FL 32327

Title            TREASURER  
Name            BAILEY, XENIA  
Address        61 CAROLINA CT  
City-State-Zip: CRAWFORDVILLE FL 32327

*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: NIGEL BRADHAM**

**PRESIDENT**

**01/24/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date