

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

DOCUMENT# N22000010252

**FILED**  
**Apr 07, 2023**  
**Secretary of State**  
**2436456509CC**

**Entity Name:** SOMERSET WRESTLING CLUB BOOSTERS INC.

**Current Principal Place of Business:**

753 SOUTHWEST 190TH AVENUE  
PEMBROKE PINES, FL 33029

**Current Mailing Address:**

753 SOUTHWEST 190TH AVENUE  
PEMBROKE PINES, FL 33029 UN

**FEI Number:** 92-0632479

**Certificate of Status Desired:** No

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

GREENE, JONATHAN  
753 SW 190 AVE  
PEMBROKE PINES, FL 33029 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 ESTEVEZ, DERICK  
Address 20860 NW 1ST STREET  
City-State-Zip: PEMBROKE PINES FL 33029

Title VP  
Name BENTON, CHANCE  
Address 4710 SW 153RD TERRACE  
City-State-Zip: MIRAMAR FL 33027

Title SECR  
Name CABAN, SANTOS  
Address 17964 SW 1ST STREET  
City-State-Zip: PEMBROKE PINES FL 33029

Title TREA  
Name GREENE, JON  
Address 753 SW 190TH AVE  
City-State-Zip: PEMBROKE PINES FL 33029

*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:** JON GREENE

**TREASURER**

**04/07/2023**

Electronic Signature of Signing Officer/Director Detail

Date