

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38373

Entity Name: FLORIDA CITRUS SPORTS FOUNDATION, INC.**Current Principal Place of Business:**ONE CITRUS BOWL PLACE
ORLANDO, FL 32805-9451**Current Mailing Address:**ONE CITRUS BOWL PLACE
ORLANDO, FL 32805-9451 US**FEI Number:** 59-3026282**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOGAN, STEVEN J
ONE CITRUS BOWL PLACE
ORLANDO, FL 32805 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 EXECUTIVE DIRECTOR
Name CLARK, SHANNON L
Address ONE CITRUS BOWL PLACE
City-State-Zip: ORLANDO FL 32805

Title PRESIDENT
Name MARTIN, TONY
Address 103 RED SKY COURT
City-State-Zip: LAKE MARY FL 32746

Title CFO
Name HERRING, SCOTT
Address ONE CITRUS BOWL PLACE
City-State-Zip: ORLANDO FL 32805

Title TREASURER
Name MASSEY, TONY
Address 1018 TEMPLE GROVE
City-State-Zip: WINTER PARK FL 32789

Title CHAIRMAN
Name KIENE, FORD
Address 10928 FLORIDA CROWN DRIVE
City-State-Zip: ORLANDO FL 32824

Title VP
Name BEVERLY, CHUCK S
Address 390 N ORANGE AVE, SUITE 900
City-State-Zip: ORLANDO FL 32801

Title SECRETARY
Name CHAMPAGNE, MICHEL
Address 485 N KELLER RD
SUITE 100
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name POTROCK, KENNETH
Address 420 ALBERTA DR
City-State-Zip: WINTER PARK FL 32789

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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: SCOTT HERRING

CFO

04/16/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	JACKSON, RICHARD
Address	580 RIDGEWOOD DR.
City-State-Zip:	WINDERMERE FL 34786