

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50776

**Entity Name:** THE CENTRAL FLORIDA SPORTS COMMISSION, INC.

**Current Principal Place of Business:**

400 W, CHURCH STREET  
SUITE 205  
ORLANDO, FL 32801

**Current Mailing Address:**

400 W, CHURCH STREET  
SUITE 205  
ORLANDO, FL 32801 US

**FEI Number: 59-3152788**

**Certificate of Status Desired: No**

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

LEONHARDT, FRED ESQ  
301 E. PINE STREET  
1400  
ORLANDO, FL 32802 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  
Name BISIGNANO, JOHN  
Address 126 EAST LUCERNE CIRCLE  
City-State-Zip: ORLANDO FL 32801  
  
Title CD  
Name MILLAY, MIKE  
Address PO BOX 10,000  
City-State-Zip: LAKE BUENA VISTA FL 32830

Title VC  
Name LEE, GREG  
Address 200 SOUTH ORANGE AVE., SUITE  
2300  
City-State-Zip: ORLANDO 32801  
  
Title TREASURER, SECRETARY  
Name GUITAR, LAURA  
Address 121 S. ORANGE AVE.  
SUITE 1500  
City-State-Zip: ORLANDO FL 32801

*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: JOHN BISIGNANO**

**PRESIDENT**

**04/28/2014**

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

\_\_\_\_\_  
Date