2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51159

Entity Name: R/C FLIERS OF VENICE, INC.

Current Principal Place of Business:

4000 KNIGHTS TRAIL ROAD NOKOMIS, FL 34275

Current Mailing Address:

4000 KNIGHTS TRAIL ROAD NOKOMIS, FL 34275 US

FEI Number: 65-0385887 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MCGREEVY, BILL 241 VISTORIA DR

NORTH PORT, FL 34287 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: BILL MCGREEVY 03/09/2016

Electronic Signature of Registered Agent

Date

FILED Mar 09, 2016

Secretary of State

CC6495847167

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR

NameHULLHORST, JIMNameBADER, ROBERTAddress1564 WATERFORD DRIVEAddress6071 ORCHIS RD>

City-State-Zip: VENICE FL 34292 City-State-Zip: VENICE FL 34293

Title VP Title DIRECTOR

NameFLYNN, JOHNNameFREEMAN, KEVINAddress180 GRAND OAK CIRCLEAddress842 OAK BRIAR LN.City-State-Zip:VENICE FL 34292City-State-Zip: OSPREY FL 34229

TitleDIRECTORTitleTREASURERNameMORRISON, EDNameMCGREEVY, BILLAddress1016 TOPELIS DRIVEAddress241 VISTORIA DR

City-State-Zip: ENGLEWOOD FL 34223 City-State-Zip: NORTH PORT FL 34287

Title SECRETARY
Name KING, HERB

Address 7891 BRISTOL AVE.

City-State-Zip: NORTH PORT FL 34291

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: JIM HULLHORST PRESIDENT 03/09/2016

Electronic Signature of Signing Officer/Director Detail

Date