

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N93000005780

**Entity Name:** FLORIDA FLY FISHING ASSOCIATION, INC.

**Current Principal Place of Business:**

1075 GRANADA AVENUE  
MERRITT ISLAND, FL 32952

**Current Mailing Address:**

FLORIDA FLY FISHING ASSOCIATION  
P.O. BOX 542345  
MERRITT ISLAND, FL 32954-2345 US

**FEI Number:** 82-5195577

**Certificate of Status Desired:** Yes

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

GORENFLO, DARYL  
1075 GRANADA AVENUE  
MERRITT ISLAND, FL 32952 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:** DARYL GORENFLO

02/23/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY / DIRECTOR  
Name FOOR, DON  
Address 6969 MCGRADY DR  
City-State-Zip: MELBOURNE FL 32940

Title COMPLIANCE OFFICER/DIRECTOR  
Name POTAMOS, JAMES F  
Address 1108 CYPRESS TRACE DRIVE  
City-State-Zip: MELBOURNE FL 32940

Title PRESIDENT / DIRECTOR  
Name PISHDAD, AMIR JR.  
Address 1609 PIONEER DRIVE  
City-State-Zip: MELBOURNE FL 32940

Title VICE PRESIDENT / DIRECTOR  
Name CURTIS, SCOTT  
Address 112 EMPIRE TERRACE  
City-State-Zip: SEBASTIAN FL 32958

Title TREASURER / DIRECTOR  
Name GORENFLO, DARYL  
Address 1075 GRANADA AVENUE  
City-State-Zip: MERRITT ISLAND FL 32952

Title CONSERVATION DIRECTOR  
Name GLASS, JIM  
Address 2781 ENGLEWOOD DRIVE  
City-State-Zip: MELBOURNE FL 32940

Title ACTIVITIES / DIRECTOR  
Name GIARD, RENE  
Address 1550 MASTERS ROAD, NW  
City-State-Zip: PALM BAY FL 32907

Title EDUCATION DIRECTOR  
Name NEMETZ, RON  
Address 3385 FT SUMTER  
City-State-Zip: MELBOURNE FL 32934

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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:** AMIR PISHDAD JR

PRESIDENT / DIRECTOR

02/23/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title PROGRAM / DIRECTOR  
Name SHERER, JOE  
Address 300 S CARPENTER ROAD  
City-State-Zip: TITUSVILLE FL 32796