

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005361

Entity Name: MANGROVE COAST FLY FISHERS, INC.

Current Principal Place of Business:

5526 SHADY BROOK TRAIL
SARASOTA, FL 34243

Current Mailing Address:

P.O. BOX 3792
SARASOTA, FL 34230 US

FEI Number: 65-0720457

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMOTHERS, CRAIG
5526 SHADY BROOK TRAIL
SARASOTA, FL 34243 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 SMOTHERS, CRAIG
Address 5526 SHADY BROOK TRAIL
City-State-Zip: SARASOTA FL 34243

Title VPD
Name WILLIAMS, ROGER
Address 219 FOURTH AVE. EAST
City-State-Zip: BRADENTON FL 34208

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: CRAIG SMOTHERS

PD

01/24/2016

Electronic Signature of Signing Officer/Director Detail

Date