

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002648

FILED
Jan 22, 2015
Secretary of State
CC7288078566

Entity Name: THE FLORIDA FOUNDATION FOR RESPONSIBLE ANGLING,
INCORPORATED

Current Principal Place of Business:

615 N 21 AVE
HOLLYWOOD, FL 33020

Current Mailing Address:

615 N 21 AVE
HOLLYWOOD, FL 33020

FEI Number: 59-3544654

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TWYFORD, TOM
201 5TH STREET
WEST PALM BEACH, FL 33401 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 DIRECTOR
Name PUTNAM, TOM
Address 2206 THOMAS DRIVE
City-State-Zip: PANAMA CITY BEACH FL 32408

Title PRESIDENT
Name TWYFORD, TOM
Address 201 FIFTH ST
City-State-Zip: WEST PALM BEACH FL 33401

Title VP
Name NICHOLS, SCOTT
Address 1115 LAKE SHORE DR
 STE 104
City-State-Zip: LAKE PARK FL 33403

Title DIRECTOR
Name BIERMAN, MARSHA
Address 1825 MONTE CARLO WAY
 #29
City-State-Zip: CORAL SPRINGS FL 33071

Title DIRECTOR
Name PEEBLES, DIANE
Address 3017 7TH AVENUE
City-State-Zip: ST PETERSBURG FL 33713

Title DIRECTOR
Name POVEROMO, GEORGE
Address 9930 NW 59TH CT
City-State-Zip: PARKLAND FL

Title DIRECTOR
Name WORKMAN, DAVE
Address 11702 BEACH BLVD
City-State-Zip: JACKSONVILLE FL

Title DIRECTOR
Name TOLLEY, GREG
Address 10501 FGCU BLVD S
City-State-Zip: FORT MYERS FL

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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: TOM TWYFORD

PRESIDENT

01/22/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY / TREASURER
Name CAMP, BILL
Address 11301 US HWY 1
City-State-Zip: N PALM BEACH FL 33408

Title DIRECTOR
Name WEBB, JOHN
Address 101 N MONROE STREET
STE 101
City-State-Zip: TALLAHASSEE FL 32301