2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Mar 03, 2003 8:00 am DOCUMENT # 759836 **Secretary of State** 1. Entity Name 03-03-2003 90855 034 ****61.25 SUNSHINE ATHLETIC ASSOCIATION, INC. Principal Place of Business Mailing Address C/O GONYO, KENNETH D C/O GONYO, KENNETH D 3326 NE 33RD ST 3326 NE 33RD ST FT. LAUDERDALE FL 33308-7104 FORT LAUDERDALE FL 33308 2. Principal Place of Business 3. Mailing Address C/0 Kenneth D. Gonyo, C.P.A. Kenneth D. Gonyo, C.P.A. 1600 S. Federal Hwy., #915 ☐ CHECK HERE IF MAKING CHANGES 1600 S. Federal Hwv., #915 Pompano Beach, FL 33062 Pompano Beach, FL 33062 4. FEI Number 59-2550255 Applied For Not Applicable Country Country \$8.75 Additional u.s. 4.5 Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LIVOTI, ANTHONY M., JR Street Address (P.O. Box Number is Not Acceptable) 805 E BROWARD BLVD., #200 FT LAUDERDALE FL 33301 Zip Code 8. 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. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PCD TITLE ☐ Delete TITLE ☐ Addition RAY, DANNY NAME NAME STREET ADDRESS 1520 SW 5TH CT STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL 33312 CITY-ST-ZIP SD TITLE ☐ Delete TITLE Change ☐ Addition NAME GINNEGAR, ERIC NAME 1809 NE 15TH AVE STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33305 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME Seguino, tony NAME 333 SUNSET DRIVE #907 STREET ADDRESS STREET ADDRESS CITY-ST-7IP FORT LAUDERDALE FL 33301 CITY-ST-ZIP VD TITLE ☐ Delete Change ☐ Addition NAME EDDY, ANDREW NAME STREET ADDRESS 1527 SW 8TH TERRACE STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL 33441 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED