

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000000328

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** SOUTH FLORIDA FLY FISHING CLUB, INC.

**Current Principal Place of Business:**

5040 SW 116 AVENUE  
COOPER CITY, FL 33330

**New Principal Place of Business:**

**Current Mailing Address:**

5040 SW 116 AVENUE  
COOPER CITY, FL 33330

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

VALVERDE, KELLY  
5040 SW 116 AVE  
COOPER CITY, FL 33330 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BLINCO, DOUG  
Address: 5040 SW 116 AVE  
City-St-Zip: COOPER CITY, FL 33330

Title: VD  
Name: JONES, CHARLIE  
Address: 5040 SW 116 AVE  
City-St-Zip: COOPER CITY, FL 33330

Title: TD  
Name: VALVERDE, KELLY  
Address: 5040 SW 116 AVE  
City-St-Zip: COOPER CITY, FL 33330

Title: SD  
Name: RUSSELL, CINDY  
Address: 5040 SW 116 AVE  
City-St-Zip: COOPER CITY, FL 33330

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: KELLY VALVERDE

TD

04/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date