

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000851

FILED  
Feb 04, 2012  
Secretary of State

**Entity Name:** FYD CARROLLWOOD HURRICANES, INC.

**Current Principal Place of Business:**

13618 DIAMOND HEAD DRIVE  
TAMPA, FL 33624

**New Principal Place of Business:**

14639 CANOPY DRIVE  
TAMPA, FL 33626

**Current Mailing Address:**

PO BOX 342745  
TAMPA, FL 33694

**New Mailing Address:**

**FEI Number:** 02-0655930

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BUSER, GARY  
13618 DIAMOND HEAD DRIVE  
TAMPA, FL 33624 US

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

CARROLLWOOD HURRICANES  
14639 CANOPY DRIVE  
TAMPA, FL 33626 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: ANNE MARIE PETRIE

02/04/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: PRICE, RYAN A  
Address: 12804 PACIFICA PLACE  
City-St-Zip: TAMPA, FL 33625

Title: VPD  
Name: RICHARDSON, WAYNE  
Address: 8326 TERRACEWOOD CIRCLE  
City-St-Zip: TAMPA, FL 33615

Title: TD  
Name: FURNARI, MIKE  
Address: 19329 WIND DANCER ST  
City-St-Zip: LUTZ, FL 33558

Title: SEC  
Name: PETRIE, ANNE M  
Address: 14639 CANOPY DRIVE  
City-St-Zip: TAMPA, FL 33626

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: ANNE MARIE PETRIE

SEC

02/04/2012

Electronic Signature of Signing Officer or Director

Date