

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003390

FILED
Mar 08, 2011
Secretary of State

Entity Name: CHARLOTTE COUNTY INLINE HOCKEY ASSOCIATION, INC.

Current Principal Place of Business:

3193 MONDAY TERRACE
NORTHPORT, FL 34286

New Principal Place of Business:

18150 CHARTER AVE
PORT CHARLOTTE, FL 33954

Current Mailing Address:

3193 MONDAY TERRACE
NORTHPORT, FL 34286

New Mailing Address:

18150 CHARTER AVE
PORT CHARLOTTE, FL 33954

FEI Number: 06-1690674

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOCH & COMPANY CPA. PA
225 W. VIRGINIA AVE.
PUNTA GORDA, FL 33950 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: P
Name: SIRANGELO, PETER S
Address: 18150 CHARTER AVE
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: VP
Name: HEIM, SANDY
Address: 10349 SANDRIST AVE
City-St-Zip: ENGLEWOOD, FL 34224

Title: LD
Name: SIRANGELO, PETER
Address: 18150 CHARTER AVE
City-St-Zip: PORT CHARLOTTE, FL 33950

Title: S
Name: MCKENZIE, BETH
Address: 10349 SANDRIST AVE
City-St-Zip: ENGLEWOOD, FL 34224

Title: TRES
Name: HEIM, SANDY
Address: 10349 SANDRIST AVE
City-St-Zip: ENGLEWOOD, FL 34224 US

Title: CM
Name: O'DONNELL, KEVIN
Address: 15584 LAKELAND CIRCLE
City-St-Zip: PORT CHARLOTTE, FL 33981

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: PETER SIRANGELI

PRES

03/08/2011

Electronic Signature of Signing Officer or Director

Date