

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006438

FILED
Jan 05, 2012
Secretary of State

Entity Name: LAKE COUNTY VOLLEYBALL OFFICIALS ASSOCIATION INC.

Current Principal Place of Business:

335 POND ROAD
MOUNT DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

2412 BAYWATER ROAD
TAVARES, FL 32778

New Mailing Address:

FEI Number: 13-4256024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DECKER, ROBERT T
5093 INDIAN OCEAN LOOP
TAVARES, FL 32778 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: RICHARDS, RONALD
Address: 335 POND ROAD
City-St-Zip: MOUNT DORA, FL 32757

Title: VP
Name: GOTFRIED, TED
Address: 1031 NORTH MAGNOLIA CIRCLE
City-St-Zip: EUSTIS, FL 32726

Title: ST
Name: SPEAKE, JAMES L JR.
Address: 2412 BAYWATER RD
City-St-Zip: TAVARES, FL 32778

Title: BA
Name: DECKER, ROBERT T
Address: 5093 INDIAN OCEAN LOOP
City-St-Zip: TAVARES, FL 32778

Title: D
Name: MASSIE, PHIL
Address: 21631 REGENCY PARK LANE
City-St-Zip: LEESBURG, FL 34748

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: JAMES L SPEAKE, JR.

S/T

01/05/2012

Electronic Signature of Signing Officer or Director

Date