

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

DOCUMENT# N05000010401

**FILED**  
**Jan 20, 2011**  
**Secretary of State**

**Entity Name:** SUNRISE SPORTS CENTER BOOSTERS, INC.

**Current Principal Place of Business:**

900 S.3RD STREET  
SUITE 104  
FORT PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

900 S.3RD STREET  
SUITE 104  
FORT PIERCE, FL 34950

**New Mailing Address:**

**FEI Number:** 86-1147817

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DE FLORIO, SHARON  
307 S. 30TH STREET  
FT. PIERCE, FL 34947 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: CRUZ, ANDREIA  
Address: 80 VIRGINIA PARK BLVD  
City-St-Zip: FT. PIERCE, FL 34947

Title: VP/S  
Name: CRUZ, WILSON  
Address: 80 VIRGINIA PARK BLVD  
City-St-Zip: FORT PIERCE, FL 34947

Title: T/ C  
Name: DE FLORIO, SHARON  
Address: 307 S. 30TH STREET  
City-St-Zip: FT. PIERCE, FL 34947

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: SHARON DE FLORIO

T/C

01/20/2011

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

\_\_\_\_\_  
Date