## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000011892

Apr 30, 2012 Secretary of State

Entity Name: BOCA RATON LACROSSE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3472 PINE HAVEN CIRCLE BOCA RATON, FL 33431

**Current Mailing Address: New Mailing Address:** 

3472 PINE HAVEN CIRCLE BOCA RATON, FL 33431

FEI Number: 20-4094990 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CECIL, JAMES D 3472 PINE HAVEN CIRCLE BOCA RATON, FL 33431 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Name: CECIL, AMY

Address: 3472 PINE HAVEN CIRCLE City-St-Zip: BOCA RATON, FL 33431

Title:

Name: SHICKLES, MICHELLE Address: 624 SUNSHINE DE City-St-Zip: DELRAY BEACH, FL 33344

Title:

CECIL, JAMES D Name: 3472 PINE HAVEN CIRCLE Address: City-St-Zip: BOCA RATON, FL 33432

Title: VΡ

Name: DINGLE, AMY Address: 789 NE 39TH ST City-St-Zip: BOCA RATON, FL 33431

Title:

SWANSON, KIMBERLY Name: 200 SW 8TH AVENUE Address: BOCA RATON, FL 33486 City-St-Zip:

Title:

RODORMER, KIMBERLY Name: Address: 5116 COLUMBO CT. DELRAY BEACH, FL 33484 City-St-Zip:

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.

Ρ SIGNATURE: AMY CECIL 04/30/2012