

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005606

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** SEMINOLE REGION CHARITY GOLF TOURNAMENT, INC.

**Current Principal Place of Business:**

20583 BOCA WEST DRIVE  
BOCA RATON, FL 33434

**New Principal Place of Business:**

**Current Mailing Address:**

20583 BOCA WEST DRIVE  
BOCA RATON, FL 33434

**New Mailing Address:**

P.O. BOX 3070  
BOCA RATON, FL 33431

**FEI Number:** 20-4993916

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DIPIETRO, JAY  
20583 BOCA WEST DRIVE  
BOCA RATON, FL 33434 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:** D  
**Name:** DIPIETRO, JAY  
**Address:** 20583 BOCA WEST DRIVE  
**City-St-Zip:** BOCA RATON, FL 33427

**Title:** D  
**Name:** DIPIETRO, MICHAEL  
**Address:** 8251 ABERDEEN DRIVE  
**City-St-Zip:** BOYNTON BEACH, FL 33437

**Title:** DD  
**Name:** MCCARTHY, MICHAEL  
**Address:** 7201 ADDISON RESERVE BLVD.  
**City-St-Zip:** DELRAY BEACH, FL 33446

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:** JAY DIPIETRO

D

01/05/2011

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

\_\_\_\_\_  
Date