

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000006476

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** SOUTHERN INTERCOLLEGIATE CONFERENCE OFFICIALS ASSOCIATION INC.

**Current Principal Place of Business:**

1802 OAKHURST STREET  
BRANDON, FL 33511 US

**New Principal Place of Business:**

**Current Mailing Address:**

1802 OAKHURST STREET  
BRANDON, FL 33511 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

LUGO, CHARLES T  
1802 OAKHURST STREET  
BRANDON, FL 33511 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: PRES  
Name: LUGO, CHARLES T  
Address: 1802 OAKHURST STREET  
City-St-Zip: BRANDON, FL 33511 US

Title: VP  
Name: WOOLDRIDGE, DAVID P  
Address: 6809 CATLIN DRIVE  
City-St-Zip: TAMPA, FL 33647-290 US

Title: TREA  
Name: LUGO, CHARLES T  
Address: 1802 OAKHURST STREET  
City-St-Zip: BRANDON, FL 33511 US

Title: S  
Name: WALTERS, JOHN  
Address: PO BOX 47651  
City-St-Zip: TAMPA, FL 33646

Title: VP  
Name: GUGLIEMINI, ANDREW  
Address: 4710 32ND AVE EAST  
City-St-Zip: PALMETTO, FL 34221 US

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: CHARLES T. LUGO

PRES

04/27/2011

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

\_\_\_\_\_  
Date