

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008488

FILED
Jun 21, 2011
Secretary of State

Entity Name: WAKULLA STORM VOLLEYBALL INC.

Current Principal Place of Business:

74 TANGLEWOOD DRIVE
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

74 TANGLEWOOD DRIVE
CRAWFORDVILLE, FL 32327

New Mailing Address:

FEI Number: 27-3487614

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SORRELL, CHARLOTTE R MS
36 MATHIS ROAD
SOPCHOPPY, FL 32358 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: BUNCH, ERICA
Address: 74 TANGLEWOOD DR
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: VP
Name: CRUM, ALICIA
Address: 566 MASHES SANDSROAD
City-St-Zip: PANACEA, FL 32346

Title: T
Name: SORRELL, CHARLOTTE
Address: 36 MATHIS RD
City-St-Zip: SOPCHOPPY, FL 32358

Title: S
Name: VATTER, VALERIE
Address: 160 CASORA DR
City-St-Zip: CRAWFORDVILLE, FL 32327

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: CHARLOTTE SORRELL

T

06/21/2011

Electronic Signature of Signing Officer or Director

Date