

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10043

FILED
Jan 08, 2010
Secretary of State

Entity Name: SEMINOLE ATHLETIC CONFERENCE, INC.

Current Principal Place of Business:

2701 RIDGEWOOD AVE.
SANFORD, FL 32773 US

New Principal Place of Business:

Current Mailing Address:

3225 LOCKWOOD BLVD
OVIEDO, FL 32765 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:

WHIGHAM, FRANK C
200 WEST FIRST STREET
SUN BANK BLDG., SUITE 22
SANFORD, FL 32771 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: PD
Name: BLASEWITZ, MICHAEL
Address: 130 TUSCAWILLA RD
City-St-Zip: WINTER SPRINGS, FL 32708

Title: PD
Name: MOMARY, SAM
Address: 3225 LOCKWOOD BLVD
City-St-Zip: OVIEDO, FL 32765

Title: PD
Name: STORCH, SHAUNE
Address: 4200 DIKE ROAD
City-St-Zip: WINTER PARK, FL 32792

Title: PD
Name: WILLIAMS, MARY
Address: 991 SAND LAKE RD.
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: PD
Name: KOTKIN, MICHAEL
Address: 655 LONGWOOD-LAKE MARY RD
City-St-Zip: LAKE MARY, FL 32746

Title: PD
Name: CASILLO, FRANK
Address: 865 S. RONALD REAGAN BLVD
City-St-Zip: LONGWOOD, FL 32750

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: SAM MOMARY

PD

01/08/2010

Electronic Signature of Signing Officer or Director

_____ Date