

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004028

FILED  
Apr 16, 2012  
Secretary of State

**Entity Name:** FRIDAY NIGHT LIGHTS LACROSSE INC

**Current Principal Place of Business:**

225 NE 1ST ST #211  
DELRAY BEACH, FL 33444

**New Principal Place of Business:**

103 SE 4TH AVE  
UNIT 202  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

225 NE 1ST ST #211  
DELRAY BEACH, FL 33444

**New Mailing Address:**

103 SE 4TH AVE  
UNIT 202  
DELRAY BEACH, FL 33483

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

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

LOWE, SARAH  
225 NE 1ST ST #211  
DELRAY BEACH, FL 33444      US

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

LOWE, SARAH  
103 SE 4TH AVE UNIT 202  
DELRAY BEACH, FL 33483      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: \_\_\_\_\_ 04/16/2012  
Electronic Signature of Registered Agent                      Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LOWE, SARAH  
Address: 225 NE 1ST ST #211  
City-St-Zip: DELRAY BEACH, FL 33444

Title: VP  
Name: MILLER, CHUCK  
Address: 1064 ANCHOR POINT  
City-St-Zip: DELRAY BEACH, FL 33444

Title: T  
Name: LOWE, ANTHONY  
Address: 103 SE 4TH AVE UNIT 202  
City-St-Zip: DELRAY BEACH, FL 33483

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: SARAH LOWE                      MGMR                      04/16/2012  
Electronic Signature of Signing Officer or Director                      Date