

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12829

FILED  
Mar 28, 2012  
Secretary of State

**Entity Name:** FLORIDA RUGBY REFEREES ASSOCIATION, INC.

**Current Principal Place of Business:**

% TERRY DAY  
3405 NORFOLK STREET  
POMPANO BEACH, FL 33062

**New Principal Place of Business:**

**Current Mailing Address:**

% TERRY DAY  
3405 NORFOLK STREET  
POMPANO BEACH, FL 33062

**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:**

DAY, TERRY E.  
3405 NORFOLK STREET  
POMPANO BEACH, FL 33062      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: DAY, TERRY  
Address: 3405 NORFOLK STREET  
City-St-Zip: POMPANO BEACH, FL 33062

Title: D  
Name: FITZGERALD, GERRY  
Address: 8205 NW 36TH CT  
City-St-Zip: CORAL SPRINGS, FL

Title: D  
Name: KARTIGANER, CRAIG I  
Address: 8860 NW 10TH CT  
City-St-Zip: FORT LAUDERDALE, FL 33322

Title: D  
Name: JENNIFER HEATH  
Address: 7608 S WESTSHORE BLVD.  
City-St-Zip: TAMPA, FL 33616

Title: D  
Name: DAVID METCALF  
Address: 4105 FOXTAIL COURT  
City-St-Zip: KISSIMMEE, FL 34746

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: TERRY E. DAY

PD

03/28/2012

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

\_\_\_\_\_  
Date