

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N46202

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Entity Name:** SOUTHERN MOST BOCCE LEAGUE, INC.

**Current Principal Place of Business:**

1229 5TH STREET  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

1229 5TH STREET  
KEY WEST, FL 33040

**New Mailing Address:**

**FEI Number:** 65-0300530

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MELLIES, NEIL S  
1229 5TH STREET  
KEY WEST, FL 33040 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/D  
Name: MELLIES, NEIL S  
Address: 1229 5TH STREET  
City-St-Zip: KEY WEST, FL 33040

Title: VP/D  
Name: COOK, WILLIAM  
Address: 2801 FLAGLER AVENUE  
City-St-Zip: KEY WEST, FL 33040

Title: T/D  
Name: LLOYD, JENNIFER  
Address: 902 EATON STREET  
City-St-Zip: KEY WEST, FL 33040

Title: S/D  
Name: PHELAN, THERESA M  
Address: 721 SOUTH STREET, APT. 3  
City-St-Zip: KEY WEST, FL 33040

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: THERESA PHELAN

SEC

04/18/2012

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

\_\_\_\_\_  
Date