

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710415

Entity Name: EL JOBEAN COMMUNITY LEAGUE, INC.**Current Principal Place of Business:**14344 JAMISON WAY
EL JOBEAN, FL 33953**Current Mailing Address:**P.O. BOX 27123
EL JOBEAN, FL 33927 US**FEI Number: 59-2793800****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**CISCO, BEVERLY D PRESIDENT
14501 KIPLING CT
PORT CHARLOTTE, FL 33953 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: BEVERLY D CISCO****03/11/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name CISCO, BEVERLY D
Address 14501 KIPLING CT
City-State-Zip: PORT CHARLOTTE FL 33953

Title TREASURER
Name SCHULL, DAVID
Address 10405 RACHEL AVE.
City-State-Zip: ENGLEWOOD FL 34224

Title DIRECTOR
Name NEDRICH, CHARLOTTE
Address 4244 NETTLE RD
City-State-Zip: PORT CHARLOTTE FL 33953

Title DIRECTOR
Name CHILLDRES, MARIE
Address 4198 NETTLE RD
City-State-Zip: PORT CHARLOTTE FL 33953

Title VP
Name THIBIDEAU, FRANCES
Address 4263 NETTLE RD
City-State-Zip: PORT CHARLOTTE FL 33953

Title DIRECTOR
Name CISCO, JEFF
Address 14501 KIPLING CT.
City-State-Zip: PORT CHARLOTTE FL 33953

Title DIRECTOR
Name SPENCE, PAT
Address 4144 NETTLE RD
City-State-Zip: PORT CHARLOTTE FL 33993

Title DIRECTOR
Name ENNIS, TOM
Address 4245 WARREN ROAD
City-State-Zip: PORT CHARLOTTE FL 33953

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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: BEVERLY CISCO**PRESIDENT****03/11/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	SECRETARY
Name	FOSTER, ABBEY
Address	4160 WOOD DUCK RD
City-State-Zip:	PORT CHARLOTTE FL 33953