2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2021
Secretary of State
7736379688CC

DOCUMENT# 721679

Entity Name: PALMETTO RAIDERS YOUTH DEVELOPMENT CLUB, INC.

Current Principal Place of Business:

18500 SW 97TH AVENUE
MIAMI, FL 33157-7025

Current Mailing Address:

P.O. BOX 570771
MIAMI, FL 33257-0771 US

FEI Number: 59-6168884

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MOSS, CLARENCE
11420 SW 196TH ST
MIAMI, FL 33157 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	D
Name	KNIGHT, ARTIES
Address	10374 SOUTHWEST 208TH LANE
City-State-Zip:	MIAMI FL 33189

Title	D
Name	GLAZE, LASHANDA
Address	10899 SW 229 ST
City-State-Zip:	MIAMI FL 33170

Title	D
Name	ALFORD, EDDIE
Address	10934 SW 152 TERR
City-State-Zip:	MIAMI FL 33157

Title	DIRECTOR
Name	FLOWERS, DARRELL
Address	10820 SW 200 DRIVE 475
City-State-Zip:	MIAMI FL 33157

Title	DIRECTOR
Name	BROWN, ANTOINETTE
Address	22681 SW 114 CT
City-State-Zip:	MIAMI FL 33170

Title	P
Name	MOSS, CLARENCE
Address	11420 SW 196TH ST
City-State-Zip:	MIAMI FL

Title	VP
Name	WILLIAMS, TYRONE
Address	20620 SW 116TH RD
City-State-Zip:	MIAMI FL 33189

Title	DIRECTOR
Name	FLORENCE, CHANQUAN
Address	26306 SW 136 PLACE
City-State-Zip:	MIAMI FL 33032

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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: CLARENCE MOSS PRESIDENT 02/01/2021

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	SECRETARY
Name	HOLMES, DEKESHA
Address	10860 SW 221 ST
City-State-Zip:	MIAMI FL 33170

Title	DIRECTOR
Name	JONES, ALMA
Address	6115 SW 69 ST
City-State-Zip:	MIAMI FL 33143