

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724387

**Entity Name:** FLORIDA CITRUS SPORTS ASSOCIATION, INC.**Current Principal Place of Business:**ONE CITRUS BOWL PLACE  
ORLANDO, FL 32805**Current Mailing Address:**ONE CITRUS BOWL PLACE  
ORLANDO, FL 32805 US**FEI Number: 59-1058144****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOGAN, STEVEN J  
ONE CITRUS BOWL PLACE  
ORLANDO, FL 32805 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 PAST CHAIRMAN  
Name KUYKENDALL, BOBBY  
Address 1560 ORANGE AVE # 750  
City-State-Zip: WINTER PARK FL 32789

Title CHAIRMAN  
Name MASSEY, ANTHONY  
Address 315 GROVELAND STREET  
City-State-Zip: ORLANDO FL 32804

Title CEO  
Name HOGAN, STEVE  
Address ONE CITRUS BOWL PLACE  
City-State-Zip: ORLANDO FL 32805

Title PAST CHAIRMAN  
Name RUFFIN, LARRY  
Address 7928 SEBAGO COURT  
City-State-Zip: ORLANDO FL 32835

Title TREASUER  
Name ODENBACH, ANDY  
Address 9801 LAKE NONA ROAD  
City-State-Zip: ORLANDO FL 32827

Title PRESIDENT  
Name POTROCK, KENNETH  
Address 1390 CELEBRATION BLVD  
City-State-Zip: CELEBRATION FL 34747

Title PRESIDENT ELECT  
Name MILLS, HAROLD  
Address 420 S. ORANGE AVENUE  
SUITE 600  
City-State-Zip: ORLANDO FL 32801

Title SECRETARY  
Name SCHAEFER, PETER  
Address 200 S ORANGE AVENUE  
SUITE 1900  
City-State-Zip: ORLANDO FL 32801

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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: STEVEN J HOGAN****CEO****03/20/2014**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP  
Name BOJALAD, RON  
Address 1000 DARDEN CENTER DRIVE  
City-State-Zip: ORLANDO FL 32837

Title VP  
Name SITTEMA, TOM  
Address 420 S. ORANGE AVENUE  
SUITE 1000  
City-State-Zip: ORLANDO FL 32801

Title VP  
Name BARTELT, SHAWN  
Address 490 E SOUTH STREET  
City-State-Zip: ORLANDO FL 32801

Title VP  
Name BYRD, LINDA  
Address 2500 MAITLAND CENTER PARKWAY  
SUITE 401  
City-State-Zip: MAITLAND FL 32751