## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001158

Entity Name: TRI-COUNTY FLY FISHERS, INC.

intity Name: TRI-COUNTY FLY FISHERS, INC

**Current Principal Place of Business:** 

543 CARRERA DR, THE VILLAGES. FL 32159

**Current Mailing Address:** 

543 CARRERA DR,

THE VILLAGES. FL 32159

FEI Number: 02-0581896 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOORJIAN, PAUL ESQ 3001 NE 185TH STREET #438

AVENTURA, FL 33180 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

FILED Feb 25, 2013

**Secretary of State** 

CC9477201142

Officer/Director Detail:

Title D Title DP

Name DOMBEK, DOUGLAS M Name GREEN, TOM

Address 543 CARRERA DR Address 855 YEMASSEE LOOP

City-State-Zip: THE VILLAGES FL 32159 City-State-Zip: THE VILLAGES FL 32162

Title DT Title DS

Name STRUNC, ROBERT Name MANJOINE, JOSEPH

Address 27114 NATURE VIEW STREET Address 4818 SUMMERBRIDGE CIRCLE

City-State-Zip: LEESBURG FL 34748 City-State-Zip: LEESBURG FL 34748

Title D Title DVF

NameFAHEY, TIMNameHEINBACH, ROBERTAddress834 CHAPMAN LOOPAddress886 CHAPMAN LOOPCity-State-Zip:THE VILLAGES FL 32162City-State-Zip:THE VILLAGES FL 32162

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: DOUGLAS M. DOMBEK

**DIRECTOR** 

02/25/2013