

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009591

Entity Name: FUN SPORTS, INC.**Current Principal Place of Business:**634 SPRINGDALE CIRCLE
FUN SPORTS, INC. OFFICE
LAKE WORTH, FL 33461**Current Mailing Address:**PO BOX 146
LAKE WORTH, FL 33460**FEI Number:** 80-0289512**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GAWLIKOWSKI, STEFFAN
634 SPRINGDALE CIRCLE
FUN SPORTS, INC. OFFICE
LAKE WORTH, FL 33461 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:** STEFFAN GAWLIKOWSKI**04/30/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title OFFICER
Name AUSTINO, JANET
Address 82 BUXTON LANE
City-State-Zip: BOYNTON BEACH FL 33426

Title OFFICER
Name CALLO, DONALD
Address 4118 DAHL DRIVE
City-State-Zip: LAKE WORTH FL 33463

Title OFFICER
Name FEARON, KEVIN
Address 3317 TURTLE COVE
City-State-Zip: WEST PALM BEACH FL 33411

Title OFFICER
Name ALEX MORALES
Address 4768 POSEIDON PLACE
City-State-Zip: LAKE WORTH FL 33463

Title OFFICER
Name DORIS GONZALEZ
Address 2370 LYNN DRIVE
City-State-Zip: WPB FL 33415

Title CHAIRMAN
Name GAWLIKOWSKI, STEFFAN
Address PO BOX 146
City-State-Zip: LAKE WORTH FL 33460

Title OFFICER
Name GAWLIKOWSKI, CORY
Address PO BOX 146
City-State-Zip: LAKE WORTH FL 33460

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: STEFFAN GAWLIKOWSKI**DIRECTOR****04/30/2019**

Electronic Signature of Signing Officer/Director Detail

Date