2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2018
Secretary of State
CC4206783855

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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, VLAD
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:

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

Title	OFFICER
Name	GAWLIKOWSKI, VLAD
Address	PO BOX 146 FUN SPORTS, INC. OFFICE
City-State-Zip:	LAKE WORTH FL 33460

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

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

Title	OFFICER
Name	SANDERS, TIMOTHY
Address	6335 PINESTEAD DRIVE, APT. 913
City-State-Zip:	LAKE WORTH FL 33463

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

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

Continues on page 2

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: VLAD GAWLIKOWSKI DIRECTOR 04/30/2018

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

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