

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

DOCUMENT# N11000002476

**FILED**  
**Jan 19, 2014**  
**Secretary of State**  
**CC4854014141**

**Entity Name:** WEST ORANGE COUNTY LACROSSE CLUB, INC.

**Current Principal Place of Business:**

13506 SUMMERPORT VILLAGE PARKWAY #136  
WINDERMERE, FL 34786

**Current Mailing Address:**

13506 SUMMERPORT VILLAGE PARKWAY #136  
WINDERMERE, FL 34786

**FEI Number:** 45-0791815

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BURDON, BRUCE  
13506 SUMMERPORT VILLAGE PARKWAY #136  
WINDERMERE, FL 34786 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 PD  
Name BURDON, BRUCE  
Address 13506 SUMMERPORT VILLAGE  
PARKWAY #136  
City-State-Zip: WINDERMERE FL 34786

Title TD  
Name MALAUSSENA, JIM  
Address 13506 SUMMERPORT VILLAGE  
PARKWAY #136  
City-State-Zip: WINDERMERE FL 34786

Title SD  
Name ROTH, ARTHUR  
Address 13506 SUMMERPORT VILLAGE  
PARKWAY #136  
City-State-Zip: WINDERMERE FL 34786

Title VD  
Name COLLIER, SCOTT  
Address 13506 SUMMERPORT VILLAGE  
PARKWAY #136  
City-State-Zip: WINDERMERE FL 34786

*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:** BRUCE BURDON

**PRESIDENT**

**01/19/2014**

Electronic Signature of Signing Officer/Director Detail

Date