

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

DOCUMENT# N13000005585

**Apr 01, 2018**

**Entity Name:** OLYMPIA TITANS ATHLETIC ASSOCIATION, INC.

**Secretary of State**

**CC3026585920**

**Current Principal Place of Business:**

8016 RAIL STREET  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

P.O. BOX 1945  
WINDERMERE, FL 34786 US

**FEI Number: 46-3119513**

**Certificate of Status Desired: Yes**

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

GATTEREAU, HAROLD  
2222 RICKOVER PLACE  
WINTER GARDEN, FL 34787 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: HAROLD GATTEREAU**

**04/01/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name THOMAS, SHELDON  
Address P.O. BOX 1945  
City-State-Zip: WINDERMERE FL 34786

Title VP  
Name CLIFTON, DAVID  
Address 9058 HARBOR ISLE DR  
City-State-Zip: ORLANDO FL 34786

Title TREASURER  
Name GATTEREAU, HAROLD  
Address P.O. BOX 1945  
City-State-Zip: WINDERMERE FL 34786

Title D  
Name MOSBY, STEPHANIE  
Address 8016 RAIL ST  
City-State-Zip: WINTER GARDEN FL 34787

Title PRESIDENT  
Name MOSBY, ALLEN  
Address 8016 RAIL ST  
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR  
Name KEVIN, THOMAS  
Address 5356 CINDERLANE PARKWAY  
City-State-Zip: ORLANDO FL 32808

Title D  
Name RUSS, LATOYA  
Address 7165 BALBOA DRIVE  
City-State-Zip: ORLANDO FL 32818

Title D  
Name HALE, MARCY  
Address 8143 WELLSMERE CIRCLE  
City-State-Zip: ORLANDO FL 32835

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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: HAROLD GATTEREAU**

**TREASURER**

**04/01/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name PADILLA, ASHLEY  
Address P.O. BOX 1945  
City-State-Zip: WINDERMERE FL 34786

Title D  
Name WHITE , CHAILLE  
Address P.O. BOX 1945  
City-State-Zip: WINDERMERE FL 34786