

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000004972

**FILED
Apr 18, 2018
Secretary of State
CC6614989835**

Entity Name: BIG FIVE FOR LIFE GIVES, INC.

Current Principal Place of Business:

13506 SUMMERPORT VILLAGE PKWY., STE.155
WINDERMERE, FL 34786

Current Mailing Address:

13506 SUMMERPORT VILLAGE PKWY., STE.155
WINDERMERE, FL 34786

FEI Number: 46-5654770

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STRELECKY, JOHN P
13506 SUMMERPORT VILLAGE PKWY., STE.155
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 D
Name STRELECKY, JOHN P
Address 13826 BLUEBIRD PARK RD.
City-State-Zip: WINDERMERE FL 34786

Title D
Name ESPARZA, GABE
Address 9714 BEVERLYWOOD ST.
City-State-Zip: LOS ANGELES CA 90034

Title D
Name WARREN, CHAD
Address 406 CORAL AVE.
City-State-Zip: MELBOURNE FL 32951

Title D
Name SABOURIN, KEVIN
Address 11165 5TH STREET EAST
City-State-Zip: TREASURE ISLAND FL 33706

Title D
Name BLAUVELT, MATT
Address 1530 N. WEILAND ST.
City-State-Zip: CHICAGO IL 60610

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: JOHN P STRELECKY

MANAGER

04/18/2018

Electronic Signature of Signing Officer/Director Detail

Date