

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1500003021

Entity Name: FAMILIA DE GLADIADORES KREWE, INC

Current Principal Place of Business:

11721 NEWBERRY GROVE LOOP
RIVERVIEW, FL 33579

Current Mailing Address:

11721 NEWBERRY GROVE LOOP
RIVERVIEW, FL 33579 US

FEI Number: 47-3524580

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHNELLER, PATRICIA L
11721 NEWBERRY GROVE LOOP
RIVERVIEW, FL 33579 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 PRESIDENT
Name SCHNELLER, PATRICIA L
Address 11721 NEWBERRY GROVE LOOP
City-State-Zip: RIVERVIEW FL 33579

Title 1ST VICE PRESIDENT
Name KEARNES, THEROSANIE
Address 1701 COUNTY TRAILS DRIVE
City-State-Zip: SAFETY HARBOR FL 34695

Title 2ND VICE PRESIDENT
Name SMITH, CHRISTINE M
Address 3813 BELLEWATER BOULEVARD
City-State-Zip: RIVERVIEW FL 33578

Title TREASURER
Name KEARNES, CHRISTOPHER
Address 1701 COUNTY TRAILS DRIVE
City-State-Zip: SAFETY HARBOR FL 34695

Title COMMUNITY LIAISON OFFICER
Name JOHNSON, APRIL
Address 8384 VALMORA STREET
City-State-Zip: SPRING HILL FL 34608

Title SECRETARY
Name LEVENTRY, AMI
Address 11209 LAUREL BROOK CT
City-State-Zip: RIVERVIEW FL 33569

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: CHRISTOPHER KEARNES

TREASURER

02/11/2016

Electronic Signature of Signing Officer/Director Detail

Date