

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000005835

Entity Name: FLORIDA SUNCOAST SOCCER LEAGUE, INC.

Current Principal Place of Business:

816 CHAMBERLAIN LOOP
LAKE WALES, FL 33853

Current Mailing Address:

816 CHAMBERLAIN LOOP
LAKE WALES, FL 33853 US

FEI Number: 47-4384144

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCMASTER, NICOLE
816 CHAMBERLAIN LOOP
LAKE WALES, FL 33853 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 ADMINISTRATOR
Name MCMASTER, NICOLE
Address 816 CHAMBERLAIN LOOP
City-State-Zip: LAKE WALES FL 33853

Title PRESIDENT
Name RIGGS-STITES, MATT
Address PO BOX 2338
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name DEAK, FRANK
Address PO BOX 2338
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name HAYNES, MICHAEL
Address P.O. BOX 2338
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name PRINCE, JUSTIN
Address P.O. BOX 2338
City-State-Zip: LAKE WALES FL 33859

Title VP
Name WALDRON, VICTOR
Address P.O. BOX 2338
City-State-Zip: LAKE WALES FL 33859

Title DIRECTOR
Name ROBERT, DONALDSON
Address PO BOX 2338
City-State-Zip: LAKE WALES FL 33853-2800

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: NICOLE MCMASTER

EXEC ADMINISTRATOR

04/23/2024

Electronic Signature of Signing Officer/Director Detail

Date