above, or on an attachment with all other like empowered.

SIGNATURE: HERBERT N. ALLEN JR.

Electronic Signature of Signing Officer/Director Detail

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000010840

Entity Name: COACHES MENTORING THROUGH BASKETBALL INC.

Current Principal Place of Business:

7517 N 40TH STREET K-206 TAMPA, FL 33604

Current Mailing Address:

7517 N 40TH ST K-206 TAMPA, FL 33604 US

FEI Number: 47-5654864

Name and Address of Current Registered Agent:

ALLEN, HERBERT N JR 7517 N 40TH ST K-206 TAMPA, FL 33604 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

Officer/Director Detail :			
Title	P	Title	S
Name	ALLEN, HERBERT N JR	Name	PATTERSON, MICHELE A
Address	7517 N 40TH ST K-206	Address	13245 SANCTUARY COVE DR 204
City-State-Zip:	TAMPA FL 33604	City-State-Zip:	TAMPA FL 33637
Title	т	Title	V
Name	PIPER, ROB F	Name	STALEY, LEROY
Address	4404 LAKE IN THE WOODS	Address	14302 WEDGEWOOD CIR.
City-State-Zip:	SPRING HILL FL 34647	City-State-Zip:	102 TAMPA FL 33613

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

PRESIDENT

01/26/2024 Date

Date

FILED Jan 26, 2024 Secretary of State 0855050382CC

Certificate of Status Desired: No