#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000010840

Entity Name: COACHES MENTORING THROUGH BASKETBALL INC.

**FILED** Aug 09, 2016 **Secretary of State** CC2613019373

### **Current Principal Place of Business:**

1809 FRENCH CREEK ROAD TAMPA, FL 33613

## **Current Mailing Address:**

1809 FRENCH CREEK ROAD TAMPA, FL 33613 US

FEI Number: 47-5654864 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

ALLEN, HERBERT N JR 1809 FRENCH CREEK ROAD TAMPA, FL 33613 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 Title S

ALLEN, HERBERT N JR PATTERSON, MICHELE A Name Name Address 1809 FRENCH CREEK ROAD 1802 FRENCH CREEK ROAD Address

**TAMPA FL 33613** City-State-Zip:

City-State-Zip: TAMPA FL 33613

Title Т

Title Name COLEMAN, KENITRA

Name STALEY, LEROY Address 10340 BARNETT LOOP

14302 WEDGEWOOD CIR. Address City-State-Zip: PORT RICHEY FL 34668

City-State-Zip: 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 above, or on an attachment with all other like empowered.