## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N34185

Entity Name: LABELLE QUARTERBACK CLUB, INC.

Current Principal Place of Business:

LABELLE HIGH SCHOOL 4050 E. COWBOY WAY LABELLE, FL 33935 FILED Apr 12, 2023 Secretary of State 8682127428CC

## **Current Mailing Address:**

P. O. BOX 1443

LABELLE, FL 33975 US

FEI Number: 65-0204742 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HIGGINBOTHAM, ANDREW 14 WASHINGTON AVE LABELLE, FL 33935 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.

Title

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SIGNATURE: ANDREW HIGGINBOTHAM

DIRECTOR

04/12/2023

Electronic Signature of Registered Agent

Date

## Officer/Director Detail:

Title

	220.0		-
Name	HARRIS, DARRELL	Name	LANGFORD, PAT

Address P. O. BOX 963 Address 851 S. MAIN STREET
City-State-Zip: LABELLE FL 33975 City-State-Zip: LABELLE FL 33935

Title PRESIDENT Title VP

NameO'BANNON, PATRICKNameREINBOTT, MICHAELAddress4050 COWBOY WAYAddress4050 COWBOY WAYCity-State-Zip:LABELLE FL 33935City-State-Zip:LABELLE FL 33935

Title DIRECTOR Title **DIRECTOR** PERKINS, LORI Name Name REINBOTT, LISA 4050 COWBOY WAY Address Address 4050 COWBOY WAY City-State-Zip: LABELLE FL 33935 City-State-Zip: LABELLE FL 33935

Title DIRECTOR Title TREASURER

NameLYONS, DAVENameREINBOTT, RACHAELAddress4050 COWBOY WAYAddress4050 E COWBOY WAYCity-State-Zip:LABELLE FL 33935City-State-Zip:LABELLE FL 33935

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: HARRIS, DARRELL

**DIRECTOR** 

04/12/2023