

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

DOCUMENT# N99000005256

**Entity Name:** WESTON WARRIOR LACROSSE CLUB, INC.

**Current Principal Place of Business:**

304 INDIAN TRACE  
600  
WESTON, FL 33326

**Current Mailing Address:**

304 INDIAN TRACE  
600  
WESTON, FL 33326

**FEI Number:** 65-0944927

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BARBA, RICHARD  
440 LAKEVIEW DR  
#101  
WESTON, FL 33326 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 P  
Name BARBA, RICHARD  
Address 440 LAKEVIEW DR #101  
City-State-Zip: WESTON FL 33326

*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:** RICHARD BARBA

**PRESIDENT**

**05/01/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date