

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005749

**FILED**  
**Apr 09, 2018**  
**Secretary of State**  
**CC9396955603**

**Entity Name:** OLYMPIC STYLE ATHLETIC TRAINING PROGRAM INC

**Current Principal Place of Business:**

13180 S.W. 103RD STREET  
DUNNELLON, FL 34432

**Current Mailing Address:**

PO BOX 14158  
NEWPORT NEWS, VA 23608 US

**FEI Number: 59-3750292**

**Certificate of Status Desired: No**

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

CHASE, ANTHONY J SR.  
13180 S.W. 103RD STREET  
DUNNELLON, FL 34432 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:** ANTHONY J CHASE SR

04/09/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PSTD  
Name CHASE, ANTHONY J SR.  
Address PO BOX 14158  
City-State-Zip: NEWPORT NEWS VA 23608

Title CFO  
Name CHASE, ANTHONY J SR.  
Address PO BOX 14158  
City-State-Zip: NEWPORT NEWS VA 23608

Title S  
Name WYNN, CELESTE  
Address PO BOX 14158  
City-State-Zip: NEWPORT NEWS VA 23608

*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:** ANTHONY CHASE

PRES

04/09/2018

Electronic Signature of Signing Officer/Director Detail

Date