

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

DOCUMENT# N93000005628

**Entity Name:** O'BANNON SNOOK TOURNAMENT AT CABBAGE KEY, INC.

**Current Principal Place of Business:**

13771 WATERFRONT DR.  
PINELAND, FL 33945

**Current Mailing Address:**

P.O. BOX 410  
PINELAND, FL 33945 US

**FEI Number:** 65-0460581

**Certificate of Status Desired:** No

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

WELLS, ROBERT  
13771 WATERFRONT DRIVE  
PINELAND, FL 33945 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 D  
Name WELLS, ROBERT  
Address P.O. BOX 410  
City-State-Zip: PINELAND FL 33945

Title D  
Name O'BANNON, PHILLIP  
Address P.O. BOX 410  
City-State-Zip: PINELAND FL 33945

Title D  
Name EDWARDS, CHARLES B  
Address P.O. BOX 410  
City-State-Zip: PINELAND FL 33945

Title D  
Name WELLS, ROBERT AIII  
Address 8280 CASA DEL RIO LANE  
City-State-Zip: FORT MYERS FL 33919

*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:** ROBERT WELLS

D

01/29/2018

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

\_\_\_\_\_  
Date