

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000009208

**Entity Name:** S4 SPORTS ACADEMY, INC.

**Current Principal Place of Business:**

361 WEST TROPICAL TRACE  
SAINT JOHN'S, FL 32259

**Current Mailing Address:**

361 WEST TROPICAL TRACE  
SAINT JOHN'S, FL 32259 US

**FEI Number:** 81-0892603

**Certificate of Status Desired:** No

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

WILLIAMSON, JOHN  
361 WEST TROPICAL TRACE  
SAINT JOHN'S, FL 32259 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            CEO  
Name            WILLIAMSON, JOHN T  
Address        361 WEST TROPICAL TRACE  
City-State-Zip: SAINT JOHN'S FL 32259

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN T WILLIAMSON

**OWNER**

**01/30/2023**

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

\_\_\_\_\_  
Date