

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008724

FILED  
Apr 20, 2012  
Secretary of State

**Entity Name:** SEBRING HALL OF FAME, INC.

**Current Principal Place of Business:**

113 MIDWAY DR.  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

113 MIDWAY DR.  
SEBRING, FL 33870

**New Mailing Address:**

FEI Number: 02-0604147

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SWAINE, J. MICHAEL  
425 S. COMMERCE AVE.  
SEBRING, FL 33870 US

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

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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: STEPHENSON, WILLIAM H III  
Address: 113 MIDWAY DR.  
City-St-Zip: SEBRING, FL 33870

Title: D  
Name: BROOKER, LUKE  
Address: 3875 ENCHANTED OAKS LANE  
City-St-Zip: SEBRING, FL 33875

Title: T  
Name: SWAINE, J. MICHAEL  
Address: 425 S. COMMERCE AVE.  
City-St-Zip: SEBRING, FL 33870

Title: P  
Name: ANDREWS, MARK  
Address: 2871 LAKEVIEW DRIVE  
City-St-Zip: SEBRING, FL 33870

Title: D  
Name: HAVILAND, JOHN  
Address: 1307 EDGEWATER POINT DRIVE  
City-St-Zip: SEBRING, FL 33870

Title: D  
Name: HAYWOOD, TAYLOR  
Address: 1317 HOTIYEE AVE.  
City-St-Zip: SEBRING, FL 33870

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: JANET L. SHOOP

D

04/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date