

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 706563

**Entity Name:** GREENBRIAR CLUB INC

**Current Principal Place of Business:**

2013 GREENBRIAR BLVD.  
CLEARWATER, FL 33763

**Current Mailing Address:**

2013 GREENBRIAR BLVD.  
CLEARWATER, FL 33763

**FEI Number:** 59-6169592

**Certificate of Status Desired:** No

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

CIANFRONE, JOSEPH R  
1964 BAYSHORE BLVD.  
SUITE A  
DUNEDIN, FL 34698 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           PRESIDENT  
Name           ELLIS, SUE  
Address        2485 INDIGO DR.  
City-State-Zip: CLEARWATER FL 33763

Title           VP  
Name           GONZALEZ, REINALDO  
Address        2001 GREENBRIAR DR. #17  
City-State-Zip: CLEARWATER FL 33763

Title           SECRETARY  
Name           LUPKE, LAURIE  
Address        2163 TIMBER LANE  
City-State-Zip: CLEARWATER FL 33763

Title           TREASURER  
Name           REILLY, ROBERT A  
Address        2077 PINE RIDGE DR.  
City-State-Zip: CLEARWATER FL 33763

Title           ASST. TREASURER  
Name           WILLIAMS, COURTNEY A  
Address        2034 PINE RIDGE DR.  
City-State-Zip: CLEARWATER FL 33763

Title           MEMBERSHIP  
Name           BRICE, BARBARA  
Address        2041 WEST RIDGE DR.  
City-State-Zip: CLEARWATER FL 33763

Title           TRUSTEE  
Name           MURPHY, HEATHER  
Address        2520 BRAMBLEWOOD DR. EAST  
City-State-Zip: CLEARWATER FL 33763

Title           TRUSTEE  
Name           BLONDELL, RUTH  
Address        2071 HILLWOOD DR.  
City-State-Zip: CLEARWATER FL 33763

**Continues on page 2**

*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 A REILLY

**TREASURER**

**04/06/2019**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title TRUSTEE  
Name CRAWFORD, LORI  
Address 2593 BRAMBLEWOOD DR. WEST  
City-State-Zip: CLEARWATER FL 33763

Title TRUSTEE  
Name VELAZQUEZ, RONNIE  
Address 2493 INDIGO DR.  
City-State-Zip: CLEARWATER FL 33763

Title TRUSTEE  
Name SKERRITT, DAVID  
Address 2343 TUDOR LANE  
City-State-Zip: CLEARWATER FL 33763

Title TRUSTEE  
Name PATERSON, JULIA  
Address 2372 TUDOR LANE  
City-State-Zip: CLEARWATER FL 33763