

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730711

FILED
Jan 31, 2024
Secretary of State
1171530891CC

Entity Name: WEST VOLUSIA KENNEL CLUB, INC.

Current Principal Place of Business:

2281 ALTON ROAD
DELTONA, FL 32738

Current Mailing Address:

P.O. BOX 1723
DELAND, FL 32724 US

FEI Number: 59-1676018

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WAGNER, TERRY
2281 ALTON ROAD
DELTONA, FL 32738 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: TERRY WAGNER

01/31/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SHEPHARD, SUSAN
Address 938 FEATHER DRIVE
City-State-Zip: DELTONA FL 32725

Title DIRECTOR
Name FOSTER, BAIN
Address PO BOX 408
City-State-Zip: ASTOR FL 32102

Title TREASURER
Name AVELLINO, MARIA
Address 875 TATER ROAD
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title SECRETARY
Name MERCHANT, GINNY
Address 38741 ILEX TRAIL
City-State-Zip: EUSTIS FL 32736

Title PRESIDENT
Name WAGNER, TERRY
Address 2281 ALTON RD
City-State-Zip: DELTONA FL 32738

Title DIRECTOR
Name STEVENSON, ARINA
Address 3127 DOW CT
City-State-Zip: DELTONA FL 32738

Title VP
Name OWEN, SCOTT
Address 1641 SADDLE VIEW RUN
City-State-Zip: OSTEEN FL 32764

Title DIRECTOR
Name POUNDS, DEE
Address 2931 NORVELL CT
City-State-Zip: DELTONA FL 32738

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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: MARIA AVELLINO

TREASURER

01/31/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GRAVES, SUSAN
Address 1936 CHERRY LANE
City-State-Zip: MOUNT DORA FL 32757